

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW
FORM 12.981(a)(1),
STEPPARENT ADOPTION: CONSENT AND WAIVER BY PARENT (11/15)**

When should this form be used?

This form is to be completed and signed by the parent who is giving up all rights to, custody of, and time-sharing with the minor child to be adopted. This consent shall not be executed before the birth of the minor child. For more information about consenting to adoption, you should refer to Chapter 63, Florida Statutes, and sections 63.062-63.082, Florida Statutes, in particular.

This form should be typed or printed in black ink. It must be signed in the presence of a **notary public** or **deputy clerk** and two witnesses other than the notary or clerk. You should **file** this form with the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1).

After completing this form, you should hand deliver a copy or duplicate original to the parent giving consent and have them sign the original saying they received a copy. Then you should file the original with the **clerk of the circuit court** in the county where the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1) is filed and keep a copy for your records.

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO. If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

IN THE MATTER OF THE ADOPTION OF

{use name to be given to minor child(ren)} Adoptee(s).

CONSENT AND WAIVER BY PARENT

1. I, {full legal name} _____, am the {Choose only one} _____ father or _____ mother of the minor child(ren) subject to this consent who is/are:

	Child's Current Name	Gender	Birth date	Birthplace {city, county, state}
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____
e.	_____	_____	_____	_____
f.	_____	_____	_____	_____

2. I relinquish all rights to, custody of, and time sharing with this (these) minor child(ren), {name(s)} _____, with full knowledge of the legal effect of the stepparent adoption and consent to the adoption by the child(ren)'s stepparent whose name is: {Choose only one} _____ {name} _____ not required for my granting of this consent.

3. I understand my legal rights as a parent and I understand that I do not have to sign this consent and release of my parental rights. I acknowledge that this consent is being given knowingly, freely, and voluntarily. I further acknowledge that my consent is not given under fraud or duress. I understand that there is a "grace period" in Florida during which I may revoke my consent. If the child to be adopted is older than 6 months at the time of consent, this grace period is for 3 business days. The term "business day" means any day on which the United States Postal Service accepts certified mail for delivery. I understand that, in signing this consent, I am permanently and forever giving up all my parental rights to and interest in this (these) minor child(ren) and that this consent may only be withdrawn if the Court finds it was obtained by fraud or duress. I voluntarily, permanently relinquish all my parental rights to this (these) minor child(ren).

4. I consent, release, and give up permanently, of my own free will, my parental rights to this

(these) minor child(ren), for the purpose of stepparent adoption.

5. I waive any further notice of the stepparent adoption proceeding.
6. I understand that pursuant to Chapter 63, Florida Statutes, "an action or proceeding of any kind to vacate, set aside, or otherwise nullify a judgment of adoption or an underlying judgment terminating parental rights on any ground may not be filed more than 1 year after entry of the judgment terminating parental rights."
7. I understand I have the right to choose a person who does not have an employment, professional, or personal relationship with the adoption entity or the prospective adoptive parents to be present when this affidavit is executed and to sign it as a witness. The witness I selected is: *{full legal name}* _____.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this consent and waiver and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Parent: _____

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

Designated E-mail Address(es): _____

Signature of Witness

Printed Name: _____

Business Address: _____

Home Address: _____

Driver's License No.: _____

State ID Card No.: _____

Signature of Witness

Printed Name: _____

Business Address: _____

Home Address: _____

Driver's License No.: _____

State ID Card No.: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on *{date}* _____ .

NOTARY PUBLIC or DEPUTY CLERK

{Print, type, or stamp commissioned name of notary or deputy clerk.}

____ Personally known
____ Produced identification
____ Type of identification produced _____

I hereby acknowledge receipt of a copy or duplicate original of this executed **Consent and Waiver**.

Signature of Parent

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the: *{choose only one}* () Mother () Father

This form was completed with the assistance of:

{name of individual} _____,
{name of business} _____,
{address} _____,
{city} _____, *{state}* _____, *{zip code}* _____ *{telephone number}* _____.