

STATE OF MAINE

PROBATE COURT

County: \_\_\_\_\_

Docket No. \_\_\_\_\_

DISTRICT COURT

Location: \_\_\_\_\_

Docket No. \_\_\_\_\_

In the Matter of the Adoption Petition of:

\_\_\_\_\_  
Name of Adoptee

PETITION TO TERMINATE  
PARENTAL RIGHTS  
IN AN ADOPTION MATTER

18-C M.R.S. §§ 9-204

22 M.R.S. § 4052

NOW COME(S) the petitioner(s) seeking to adopt the above-named minor, who, as part of the adoption petition, request(s) that the court terminate the rights of the minor's parent(s). In support of this request, the petitioner(s) state(s) as follows:

1. Minor child information:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*First Middle Last*

Place of birth: \_\_\_\_\_  
*City/Town State*

Legal residence: \_\_\_\_\_  
*Street City/Town Zip*

2. Petitioner information:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*First Middle Last*

Legal residence: \_\_\_\_\_  
*Street City/Town Zip*

Mailing address: \_\_\_\_\_  
*Street City/Town Zip*

Relationship to minor child: \_\_\_\_\_

3. Petitioner information:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*First Middle Last*

Legal residence: \_\_\_\_\_  
*Street City/Town Zip*

Mailing address: \_\_\_\_\_  
*Street City/Town Zip*

Relationship to minor child: \_\_\_\_\_

4. Legal parent information:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*First Middle Last*

Legal residence: \_\_\_\_\_  
*Street City/Town Zip*

Mailing address: \_\_\_\_\_  
*Street City/Town Zip*

**5. Legal parent information:**

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

*First Middle Last*

Legal residence: \_\_\_\_\_

*Street City/Town Zip*

Mailing address: \_\_\_\_\_

*Street City/Town Zip*

**6. Guardian ad litem information (if applicable):**

Name: \_\_\_\_\_

*First Last*

Mailing Address: \_\_\_\_\_

*Street City/Town Zip*

**7. Indian Child Welfare Act. (Select one of the following)**

A.  The petitioner knows that the adoptee is **not** an unmarried person under the age of 18 who (1) is a member of an Indian tribe or (2) is eligible for membership in an Indian tribe and the biological child of a member of an Indian tribe:

B.  The petitioner knows, or has reason to know, that the adoptee is an unmarried person under the age of 18 who (1) is a member of an Indian tribe or (2) is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe.

**Name of tribe:** \_\_\_\_\_

**PLEASE NOTE:** The petitioner(s) **must** provide notice of this petition to the adoptee's parent(s) or Indian custodian and the tribe named above. Such notice must comply with 25 C.F.R. § 23.111 and must be sent by certified mail, return receipt requested and via email, to the address and email address on file with the United States Department of the Interior, Bureau of Indian Affairs. The petitioner(s) must then file a copy of that notice with any return receipts or other proof of service with the court;

C.  The petitioner(s), at the time of this petition do(es) not yet know or have reason to know if the adoptee child is an Indian child. The petitioner(s) will conduct any remaining future inquiry required to determine Indian child status as required by 25 U.S.C. §§ 1901-1963 and 22 M.R.S. §§ 3941-3955.

**8. Summary of statement of facts which the petitioner(s) believe(s) constitute(s) a basis for the request for termination.**

A. The minor child has been removed from the parents' custody and the parents now consent to termination;  
**OR**

B. One or more of the following is true:

The parent(s) is/are unwilling or unable to protect the child from jeopardy and these circumstances are unlikely to change within a time which is reasonably calculated to meet the child's needs;

The parent(s) is/are unwilling or unable to take responsibility for the child within a time which is reasonably calculated to meet the child's needs; or

The parent(s) has/have abandoned the child.

**REQUIRED: Petitioner(s) has/have attached an affidavit that states facts in support of the allegations.**

**9. EFFECTS OF A TERMINATION ORDER.**

- A. An order terminating parental rights divests the parent(s) and child of all legal rights, powers, privileges, immunities, duties, and obligations to each other as a parent and child, except that the child inherits from the child's former parent(s) of so provided in the order.
- B. The termination of one parent's rights shall not affect the rights of the other parent.
- C. A parent whose rights have been terminated shall not be entitled to notice of the child's adoption proceedings, nor shall the parent have any right to object to the adoption or participate in the proceedings.
- D. No order terminating parental rights may disentitle a child to benefits due to the child from any third person, agency, state, or the United States; nor may it affect the rights and benefits that a Native American derives from descent from a member of a federally recognized Indian tribe.
- E. If, prior to the termination of parental rights, the parent was convicted of a crime against the child, the court may include in the termination order the requirement that the parent whose rights are terminated make a lump sum payment to assist in future financial support of the child.

**10. NOTICE TO PARENTS.**

You are entitled to legal counsel in these proceedings. If you want a lawyer and are unable to afford one, you must contact the court as soon as possible to request that the court appoint a lawyer for you. Please note you must submit your request in writing or in person at the following court location:

<i>Name of court</i>	<i>Street</i>	<i>City/Town</i>	<i>Zip</i>
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WHEREFORE, the petitioner(s) request(s) that the court grant the termination of parental rights requested in this petition.

\_\_\_\_\_  
**Signature of Petitioner**  
 Date: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Petitioner**  
 Date: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Attorney for Petitioner(s), if any:**

\_\_\_\_\_  
 Signature of Attorney and Maine Bar Registration Number  
 Date: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_

**STATE OF MAINE**

\_\_\_\_\_ COUNTY

Personally appeared the above named, \_\_\_\_\_ and \_\_\_\_\_, and made oath that the foregoing statements are true under penalty of perjury.

Before me,

Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Attorney at Law / Notary Public / Register / Clerk