

<p align="center">STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY</p>	<p align="center">STATEMENT OF PARENT/GUARDIAN AUTHORIZING TEMPORARY PLACEMENT OF CHILD FOR ADOPTION</p>	<p>FILE NO.</p>
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In the matter of the child _____ Full name of child DOB: _____

1. I have legal and physical custody of the child as mother. father.
 guardian pursuant to an order issued by the _____ court. (Copy of order is attached.)
Name of court

2. I authorize _____, a child-placing agency, to make a temporary placement of the child with prospective adoptive parents in accordance with the Michigan Adoption Code, and
 a. I have read a preplacement assessment of the prospective adoptive parent(s) that was completed or updated less than a year ago and which states that the prospective adoptive parent(s) are suitable to be parent(s) of an adoptee.

OR
 b. I have been informed that the child-placing agency must give me an opportunity to review the preplacement assessment of the prospective adoptive parent(s) before any temporary placement.

3. I have been informed that I retain full parental rights to the child and that the agency must file a petition on my behalf if I wish to regain custody of my child during the temporary placement in the adoptive home.

I declare that this statement has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature of parent/guardian

Name of parent/guardian (print)

Signature of parent/guardian

Name of parent/guardian (print)

Signature of witness

Name of witness (print)

Signature of witness

Name of witness (print)

CERTIFICATION BY PARENT/GUARDIAN OF UNEMANCIPATED MINOR PARENT

I certify that I am the parent legal guardian of _____ who is an unemancipated minor parent of the child. I join with the parent in authorizing the child-placing agency to make a temporary placement of the child with the prospective adoptive parents.

Date

Signature of parent/guardian

Name of parent/guardian (print)

Signature of witness

Name of witness (print)

Address City State Zip

Do not write below this line - For court use only