

STATE OF VERMONT

SUPERIOR COURT

PROBATE DIVISION

Unit

Case No. _____

In Re:	DOB:
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**VERIFIED PETITION FOR ENFORCEMENT OR MODIFICATION
OF POST-ADOPTION CONTACT
15A V.S.A. § 9-101**

- This is a Motion for enforcement by former legal parent(s)
 Motion for modification by adoptive parent(s)
 Motion for termination by adoptive parent(s)

<i>Petitioner's Name</i>	<i>Respondent's Name</i>
<i>Mailing Address</i>	<i>Mailing Address</i>
<i>Phone Number</i>	<i>Phone Number</i>

Petitioner(s) _____
is/are: (check one) the adoptive parent(s) the former parent(s) of minor child
_____, age _____ adopted through the
_____ Court on _____. A copy of the post-adoption contact agreement entered into
under 33 V.S.A. § 5124 on _____ is attached.

I affirm that I/we have participated or attempted in good faith to participate in alternative dispute resolution activities to resolve the dispute prior to filing this petition. Yes No
Explain:

I am the former legal parent 15A V.S.A. § 9-101(b)

I seek to enforce the post-adoption contact agreement because I believe the adoptive parents are not following the terms of the agreement. I am able to show by a preponderance of the evidence* that enforcement of the agreement is in the best interests of the child for the following reasons:

* This means that the Judge will need to be convinced that what you are claiming is more likely than not to be true.

I am asking the Court to enforce the agreement as follows:

I am the adoptive parent

I seek to: (check one) modify terminate the agreement.

I am able to show by clear and convincing evidence* that modification or termination of the agreement is in the best interests of my child for the following reasons:

*This means that the Judge will need to be convinced that what you are claiming is substantially more likely than not to be true.

I am asking the court to modify or terminate the agreement as follows:

Complete This Section Before Filing This With the Court:

I mailed a copy of this petition to the other party/parties to the agreement at the following address:

I/We declare that the above statements are true and accurate to the best of my/our knowledge and belief. I/We understand that if the above statements are false, I/We will be subject to the penalty of perjury or to other sanctions in the discretion of the court.

Date: _____

Signature of Petitioner A

City, County, State

Printed Name

Date: _____

Signature of Petitioner B

City, County, State

Printed Name