

**STATE OF VERMONT**

**SUPERIOR COURT**

**PROBATE DIVISION**

**Unit**

**Docket No.**

**In re Adoption of:**

**CONSENT OF MINOR TO ADOPTION  
15A V.S.A. §2-401(c)**

I, being a minor 14 years old or older, voluntarily consent to my adoption.

**Name of the Person(s) Seeking to Adopt Me:** \_\_\_\_\_

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Minor*

**At:** \_\_\_\_\_  
*City, County and State*

\_\_\_\_\_  
*Printed Name*

Signed and confirmed in the presence of the Judge or in the presence of a person directed by the Judge

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Printed Name of Judge or Other Person Authorized by Judge*