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**IN THE DISTRICT COURT OF \_\_\_\_\_\_\_\_\_\_\_\_ COUNTY, KANSAS**

**IN THE INTEREST OF:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Year of Birth \_\_\_\_\_\_\_\_\_\_\_\_ A □ male □ female**

**CONSENT TO APPOINTMENT OF PERMANENT CUSTODIAN**

Pursuant to K.S.A. 38-2268

**NOTICE TO PARENT:** **This is an important legal document. When you sign this consent, a permanent custodian will be appointed for your child. The permanent custodian shall exercise all of the rights and responsibilities of a parent, except consent to adoption or as limited by the Court. You are still responsible for paying child support.**

 My name is\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and I am the **□ mother □ father** of the child named above and I state to the Court:

1. My child, named above, was born on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hospital in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. I presently reside at
3. I am \_\_\_\_\_ years of age and was born on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. I understand that my parental rights are not being terminated and I can be ordered to pay child support and medical support for my child.
5. I understand that to exercise any rights I still have I must keep the court up to date about how to contact me, with my current address and telephone number.
6. I understand that if my child is ever placed for adoption, the court will try to let me know by using the information I have given them, and if my address and telephone number are not up to date I might not know if my child is placed for adoption.
7. I understand that if I want information about my child’s health or education I will have to keep the court up to date about how to contact me, because the information will be sent to the latest address the court has.
8. I understand that I may be able to have some contact with my child, but only if the permanent custodian decides it is in the child’s best interests and if the court allows the contact.
9. I understand that unless the court orders differently, the permanent custodian has the right to make the following decisions about my child: the amount and type of contact I have with my child; consent to my child’s marriage; consent to medical treatment for my child; consent to mental health treatment for my child; consent to placement of my child in a psychiatric hospital or an institution for the developmentally disabled; consent to behavioral and medical experiments; consent to sterilization and consent to withholding life-prolonging medical treatment.
10. I understand this consent is final.
11. I understand the permanent custodian will have full authority and all the rights of a birth parent or legal guardian over the child, except the power to place the child for adoption and give consent to adoption, and as otherwise limited by the court.
12. I consent to the appointment of a permanent custodian by the court.
13. I have read and understand the above and I am signing it as my free and voluntary act.

Dated this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_, in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of Kansas at \_\_\_\_:\_\_\_\_ □ a.m. □ p.m.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Parent

 Name

 Address

 Telephone Number

 [Fax Number]

 [E-mail Address]

**CERTIFICATE OF ATTORNEY**

 I am a licensed attorney representing the parent named above and have explained to that parent that by signing this consent the custodian will exercise all parental rights to the child, except the right to consent to adoption, and that parent confirmed that intention and desire.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Attorney

 Name

 Supreme Court Number

 Address

 Telephone Number

 [Fax Number]

 [E-mail Address]

**CERTIFICATE OF ATTORNEY FOR MINOR PARENT**

 I am a licensed attorney representing the parent named above, who is a minor. I have fully explained that by signing this consent to appointment of a permanent custodian that parent is permanently giving up all parental rights to the child, except the right to consent to adoption, and that parent has confirmed that intention and desire. I was present at the execution of this consent.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Attorney

 Name

 Supreme Court Number

 Address

 Telephone Number

 [Fax Number]

 [E-mail Address]

**ACKNOWLEDGMENT BEFORE JUDGE OF DISTRICT COURT**

STATE OF KANSAS )

 ) ss:

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

 I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Judge of the District Court, \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Judicial District, hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, known to me to be the same person whose name is subscribed to the foregoing consent, appeared before me this day in person and acknowledged the consent and it was a free and voluntary act.

 I have fully explained that by signing such consent the custodian will exercise all of the parental rights to such child as explained in the consent form and the parent executing this consent confirmed that intention and desire.

Dated , at : **☐** a.m. **☐** p.m. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Judge of the District Court

**OR**

**ACKNOWLEDGEMENT BEFORE NOTARY PUBLIC**

STATE OF KANSAS )

 ) ss:

COUNTY OF )

 I certify that , known to me to be the same person whose name is subscribed to the foregoing relinquishment, appeared before me this day in person and acknowledged that (she)(he) signed such relinquishment as (her)(his) free and voluntary act, for the specified purpose.

Dated , at : **☐** a.m. **☐** p.m.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Authority

K.S.A. 38-2268.

Notes on Use

 With the consent of the guardian *ad litem* and the secretary, a parent may consent to appointment of a permanent custodian prior to a hearing to consider the termination of parental rights. The parent may consent to the appointment of the secretary or an individual as permanent custodian. When the consent is to the secretary, the secretary may place the child in the permanent custody of an individual who is appointed permanent custodian. The consent shall be acknowledged before a judge or a notary. If the relinquishment is acknowledged before a judge, it shall be the duty of the court to advise the consenting parent of the consequences of the consent. K.S.A. 38-2272(f) lists consequences of the consent. If a parent consents to appointment of a permanent custodian based on a belief that the other parent would so consent or be found unfit, and neither occurs, the consent shall be null and void. A consent is final when executed, unless the consenting parent proves by clear and convincing evidence, prior to the appointment of a permanent custodian, that the consent was not freely and voluntarily given. K.S.A. 38-2272(g).

 K.S.A. 38-2272 provides that the secretary’s custody of the child shall cease and the court may, but is not required to, terminate jurisdiction over the child upon appointment of the permanent custodian. If an order terminating jurisdiction is not entered, the court may impose limitations or conditions upon the rights and responsibilities of the permanent custodian, some of which are set out in K.S.A. 38-2272(d). Those limitations or conditions shall be set out in the order of appointment.

 If the person cannot read and understand English, specifically state how they were informed of all their rights and the consequences of this consent.

 K.S.A. 38-2205(b)(2) requires an attorney be appointed for a minor or parent and when the parent is mentally ill or otherwise has a disabling condition.