

FORM 19

(Family Services Act, S.N.B. 1980, c.F-2.2, s.79(3))

NOTICE OF INTENTION TO APPLY FOR AN ADOPTION ORDER

To: The Minister of Families and Children

Take notice that I, and I, of in the of and Province of New Brunswick hereby give you notice of my(our) intention to apply for an adoption order effecting the adoption of (the "child")

. (given name(s), initial letter of surname and birth registration number) who was born on at the in the Province of New Brunswick. (day/month/year) (place of birth)

1 The child is/is not related to me (us). (If related, state nature of relationship.)

2 Check one:

[] The child is in the care of the Minister.

- OR -

[] The adoption is private. The name(s) and address(es) of the parent(s) of the child (or the guardian(s) if the parents are dead) are

3 I(We) understand that:

(a) the court may require the Minister to cause an investigation to be made into the adoption placement and to provide a report to the court;

(b) it is an offence under the Family Services Act, whether before or after the birth of a child, to make, give or receive or agree to make, give or receive a payment or reward or favour for or in consideration of or in relation to

- (i) the adoption or proposed adoption of a child,
(ii) the giving of consent or the signing of an adoption consent to the adoption of a child,
(iii) the placement of a child with a view to the adoption of the child, or
(iv) the conduct of negotiations or the making of arrangements with a view to the adoption of a child.

4 I(We) agree to furnish such information as may be required if the court requests an investigation to be made into the adoption placement.

DATED at, this day of, 20.

. (signature)

. (signature)