

**Form 6-1904: Consent to Step-Parent Adoption**

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IN THE TRIAL COURT OF THE SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA

<p>IN THE MATTER OF ADOPTION OF _____</p> <p><b>Name</b></p> <p>_____</p> <p><b>Date of Birth</b></p>	<p>Case No. _____</p> <p><b>CONSENT TO STEP-PARENT ADOPTION</b></p>
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Pursuant to Section 6-1906 of the code of the Sac & Fox Tribe of the Mississippi in Iowa, I, \_\_\_\_\_ give my full and free consent to the adoption of said child by \_\_\_\_\_, without relinquishing any of my rights, duties, and obligations as his/her parent.

**Before this Court I do state:**

1. That I am the Mother / Father / Guardian of \_\_\_\_\_, who is an enrolled member of the Sac & Fox Tribe of the Mississippi in Iowa or eligible for enrollment of the Tribe.
2. That I desire to have my child adopted by my spouse, so that both I and my spouse will have the full incidence of parental rights to my child.
3. That I fully understand that Section 6-1906(d) of the Code of the Sac and Fox Tribe of the Mississippi in Iowa guarantees that I have a right to withdraw my consent to adoption for any reason within ten (10) working days after the day I sign this consent. I understand that to revoke my consent, I would provide written notification of my withdrawal of consent to the agency, Tribal Department, or individual to which the child was given, within the 10-day period, and after such, my consent will be irrevocable unless my consent was obtained by fraud.
4. That I waive notice of the adoption hearing for my child and agree that the Court may enter the adoption decree without my presence at said hearing.
5. That I believe my consent to adoption is for good cause and in the best interest of my child.
6. That this consent was not signed prior to, or within ten days of the birth of the child.

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7. That I do hereby give my consent for the adoption of by child by

\_\_\_\_\_.

**\*\*PLEASE WAIT TO SIGN & DATE UNTIL IN FRONT OF A NOTARY\*\***

\_\_\_\_\_  
*Signature of Consenting Parent*

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

\_\_\_\_\_  
*Printed Name of Consenting Parent*

Signed before me on \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 *Signature of Notary Public, State of \_\_\_\_\_*

*Tribal Court Staff Title: \_\_\_\_\_*

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**Tribal Court Representative Witness**

By signing below, the Tribal Court Representative Witness to the signing of this consent by the consenting Parent, hereby attest that to the best of their knowledge and belief: The consenting parent read this consent; the consenting parent signed the consent voluntarily and knowingly; the consenting parent was of sound mind when signing this consent; the consenting parent was not coerced nor under duress when signing this consent; and the consent was signed by the consenting parent in my presence.

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

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

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