

## Request Form to 'Give Notice' to the Non Custodial Parent Where a Child Over 12 Years is Consenting to their own Adoption

<b>Name of Child to be adopted:</b>			
<b>Names of Proposed Adoptive Parents</b>	<b>Male</b>	<b>Female</b>	
<b>Surname:</b>			
<b>Given Name(s):</b>			
<b>Home Address:</b>		<b>Postcode:</b>	
<b>Postal Address:</b>		<b>Postcode:</b>	
<b>Non-Custodial Birth Parent to Notify</b>	<b>Male</b>	<b>Female</b>	
<b>Surname:</b>			
<b>Given Name(s):</b>			
<b>Home Address:</b>		<b>Postcode:</b>	
<b>Postal Address:</b>		<b>Postcode:</b>	
<b>Date Consent given by Child to his/her adoption:</b>			
<b>Court Proceedings Number (provided by Supreme Court):</b>			
<b>Date application filed at Court:</b>			
<p>Please email above information to</p> <p style="color: blue; text-decoration: underline;"><a href="mailto:Adoption.PermanentCare@facsnsw.gov.au">Adoption.PermanentCare@facsnsw.gov.au</a></p> <p>or fax to 9716 3001</p>			