

STATE OF MAINE

PROBATE COURT

County: \_\_\_\_\_

Docket No. \_\_\_\_\_

DISTRICT COURT

Location: \_\_\_\_\_

Docket No. \_\_\_\_\_

IN RE: \_\_\_\_\_  
(Minor Name)

PARENT'S CONSENT TO  
APPOINTMENT OF GUARDIAN  
OF MINOR

Interim  Final

18-C M.R.S. § 5-205(6)

1. I, \_\_\_\_\_, am the legal parent of the above-named minor child.

2. A petition to appoint a guardian for my minor child is currently pending. I wish to CONSENT to the  
 interim  final appointment of the proposed guardian, and state as follows:

- a. I understand the nature of a minor guardianship and I agree that the establishment of a minor guardianship for my minor child is in my minor child's best interests at this time.  Yes  No
- b. I have had enough time to consider whether I wish to sign this consent and I understand that I have the right to seek legal advice and the right to have an attorney be appointed to represent me if I cannot afford to hire an attorney.  Yes  No
- c. As one of the parents of this minor child, I understand that I have the legal right to raise my child. I understand that I do not have to agree to this guardianship; I am entitled to a full legal proceeding to determine if I am suitable or unsuitable to parent at this time. I freely, without threats or intimidation by any person, agency or organization, agree to the establishment of a minor guardianship, without a full court process, for my minor child.  Yes  No
- d. I understand that if I want to end this voluntary guardianship for my minor child, I will have to petition the court to do so. If the guardian(s) does/do not agree, they will have to prove to the court that I am unsuitable to parent at that time.  Yes  No
- e. I understand that how long the appointment will last will be as set by the court in the Order Appointing Guardian of Minor.  Yes  No

Dated: \_\_\_\_\_

Attorney for Parent, if any:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

STATE OF MAINE

\_\_\_\_\_ COUNTY

Personally appeared the above named \_\_\_\_\_, and made oath that the foregoing statements are true under penalty of perjury.

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

Before me,

\_\_\_\_\_  
Attorney at Law / Notary Public / Register / Clerk