

IN THE COMMON PLEAS COURT OF ERIE COUNTY, OHIO  
PROBATE DIVISION

IN THE MATTER OF THE  
PLACEMENT FOR ADOPTION  
OF THE UNBORN CHILD OF

\*  
\*  
\*  
\*  
\*

CASE NO. \_\_\_\_\_

APPLICATION FOR PROPOSED  
PLACEMENT

Pursuant of ORC Section 5103.16

\*\*\*\*\*

I, the undersigned \_\_\_\_\_ and \_\_\_\_\_  
Name Name

\_\_\_\_\_ Address Address

apply to the Erie County Probate Court for approval of the proposed placement of my/our unborn child, expected to be born on or about, or having been born on \_\_\_\_\_, 19\_\_ for the purpose of Adoption. Applicant \_\_\_\_\_ states that she is \_\_\_\_\_ years of age and resides at \_\_\_\_\_,

number & street

\_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip code

Applicant states that he is \_\_\_\_\_ years of age and resides at

\_\_\_\_\_ number & street \_\_\_\_\_ city \_\_\_\_\_ state

\_\_\_\_\_, and that he is the putative father of said child.  
zip code

It is proposed by your Applicant(s) to place the child for the purpose of adoption with:

\_\_\_\_\_ of \_\_\_\_\_  
name address

This application has been made after a full consideration of all the options available and is made voluntarily and with a full understanding of all the implications of this application for placement. I(we) have been advised with regard to the full effect in law of the filing of this Application for Placement and understand that it is being made for the purpose of having my(our) child placed for adoption with the person/persons I(we) have chosen.

I(we) further represent that I(we) have been fully advised of my/our legal rights with regard to this Application for Placement for adoption and the full effect thereof by my/our attorney, \_\_\_\_\_, or have waived my(our) right to legal counsel.

I understand that when the adoption proceeding is completed in its entirety, that it will be final and all rights and obligations existing with regard to said child as they apply to me(us) will be fully terminated and that the adoption of my(our) child will be irrevocable.

Furthermore, there has not been and are not contemplated to be any monies to be received by me(us) or paid to me(us) in consideration of the filing of this Application and the only expenses that are being paid by the adopting parents are those provided by law.

Attached to this Application is a statement, in Affidavit form, required by the Ohio Revised Code, Section 5103.16A wherein I(we) state that I(we) am/are aware of the right to contest the decree of adoption, subject to limitations of the Ohio Revised Code, Section 3107.16.

I(we) request, therefore, that this matter be set for hearing and that an independent investigation of the proposed placement be conducted as provided in the Ohio Revised Code, Section 3107.12.

\_\_\_\_\_  
Father of Child

\_\_\_\_\_  
Mother of Child

\_\_\_\_\_  
Date

\_\_\_\_\_  
Place