□ District Court □ Denver					
Court Address:	unty, Colorado				
Court / Addi coo.					
In the Matter of the Petition of	of:				
			And		
		F	Petitioner(s)		
For the Relinquishment of a	Child,	······································	0.1.0.10.1(0)		
	(ahild's nama)			▲ cou	URT USE ONLY
(child's name) Attorney or Party Without Attorney (Name and Address):			Case Number		
Phone Number: E	E-mail:			Division	Carretra a ma
FAX Number: A			R DEXPE		Courtroom NOUISHMENT
1 Elmon on			9-5-103.5, C		NGOIOIIIIEN
h - Datition on/a) no on attento		la a Carrento	·		
he Petitioner(s) respectfully r	epresent(s) to t	ne Court:			
		(name	of child) was	horn on	(date), ir
	(C	ally/State), allo	is the child of	the Fethioner(5).
. The names, dates of birth,	and addresses	s of the parent	s of the child a	are:	
Information about the Mo	other:	etitioner 🖵	Co-Petitioner/F	Respondent	
Mother's Name:			Date of	Birth:	
Street Address:					
Mailing Address, if differer	nt:				
City:	State:	Zip Code	e:	Main Phone #	# :
Email Address:			Secon	dary Phone #:_	
Information about the Fa	nther: \square P	etitioner 🔲	Co-Petitioner/F	Respondent	☐Presumed ☐Alleged
Name:				Date of Birth:_	
Street Address:					
Mailing Address, if differer					
City:	State:	Zip Code	e:	Main Phone #	# :
Email Address:			Secon	dary Phone #:_	
Information about the Fa					D D
Name:	ther: ⊔ P	etitioner 🖵	Co-Petitioner/F	Respondent	■Presumed ■Alleged
				•	_
				Date of Birth:	
Street Address:				Date of Birth:	
	nt:			Date of Birth:_	

3.	Venue is proper in this county because:
	(a) The Petitioner(s) reside(s) in this county at
	OR
	(b) The child resides in this county at
	OR
	(c) A Child Placement Agency, is involved and is
	located in this county with an office registered with the Colorado Department of Human Services at:
4.	The Petitioner(s) wish(es) to relinquish the child because:
5.	The Petitioner(s) believes that this relinquishment is in the best interest of the child named above.
ô.	The Petitioner(s) understand(s) that: After the Order of Relinquishment is entered, the Petitioner(s) will be unable to change his/her/their mind(s) about relinquishment.
	OR
	☐ If this is an Expedited Relinquishment, the Petitioner(s) understand(s) that after the Petition is filed with the Court that the Petitioner(s) will be unable to withdraw the attached affidavit in support of the relinquishment.
7.	The Petitioner(s) understand(s) that this is a permanent termination of parental rights with respect to the child named above.
3.	The Petitioner's decision to relinquish the child named above is knowing and voluntary and without undue pressure or influence from anyone else.
Э.	The Petitioner(s) has/have has/have not received counseling from regarding this proposed relinquishment, as described in the attached Affidavit of Relinquishment Counseling.
10.	The child \square is \square is not a member or eligible to be a member of an Indian tribe as defined by the Indian Ch Welfare Act. If applicable, name of tribe (Attached is assessment form JDF 567 or JDF 568, to comply with the Indian Child Welfare Act (ICWA).

Notice of this Petition has been provided to the parent or Indian custodian of the child and to the triba agent of the tribe, as required by §19-1-126(1)(c), C.R.S.					
Reasonable efforts have been made to send not	Reasonable efforts have been made to send notice to the identified persons as follows:				
	g that notice was properly sent. If the postal receipts have ceipts or copies shall be filed with the Court within ten days				
11. The child □is □is not twelve years of age or older	r.				
12. The child □is □is not one year of age at the time	of filing this Petition.				
13. The child □has □has not received counseling in o	connection with this proposed relinquishment.				
Wherefore, the Petitioner(s) respectfully request(s) the transfer guardianship of the person and legal custody of	nat the Court enter a Final Order of Relinquishment and if the child to a proper person or agency.				
VERIFICATION AND	ACKNOWLEDGEMENT				
I swear/affirm under oath that I have read the foregoing and correct to the best of my knowledge.	g Petition and that the statements set forth therein are true				
Petitioner Signature Date	Co-Petitioner Signature Date				
Subscribed and affirmed, or sworn to before me	Subscribed and affirmed, or sworn to before me				
Ву	by				
in the County of,	in the County of,				
State of, this	State of, this				
day of, 20	day of, 20				
My Commission Expires:	My Commission Expires:				
Notary Public/Clerk	Notary Public/Clerk				