**Form 61.02**

20 No.

[*Supreme Court of Nova Scotia/Supreme Court*

*of Nova Scotia (Family Division)*]

 Application, with consents, by [name]

to adopt, under the *Children and Family Services Act*,

the person whose birth is registered as [number] [*by the*

*Registrar General of Nova Scotia*/other]

**Application for Adoption with Consents**

**To:** [name] as representative of the Minister of Community Services

**The applicant requests an adoption order**

The applicant is applying to a judge in chambers to adopt [name] [*and to change* his/her *name to* ] .

The applicant started this application by filing this notice on the date certified by the prothonotary.

**Grounds for order**

The applicant is applying for the order on the following grounds:

1 I, [name] , [*am single/am married to* ] . I reside at [community] , am [age] years old, and am a [occupation] .

2 I, [name] , [complete as above for a second applicant.]

3 [Describe the circumstances under which the person being adopted came to live with the applicant. Include whether there was a placement, the development of a relationship with a parent, or another circumstance that led to the decision to adopt.]

4 The person to be adopted has lived with [*me/us*] for years. [He/She *also shares our home with .* Describe others who live with the person to be adopted, including age, dependancy, and relationship to the applicant.]

5 [*I/We*] have the ability and means to provide care, maintenance, and education for the person to be adopted. [Give details.]

6 [*I/We*] desire to adopt this person as [*my/our*] own child.

7 [*I/We* *also apply for an order changing the name of this person to* .]

8 [*I/We*] filed, with the Minister of Community Services, a notice of proposed adoption

on , 20 and received the Minister’s acknowledgement on .

9 *[The child is, or is entitled to be, a Mi’kmaq child and a cultural connection plan has been*

 *developed.]*

**Consents**

[*I/we*] [*have obtained/expect to obtain*] all necessary consents for the adoption order to be granted.

**Time, date, and place**

The application is to be heard by the judge in chambers at [*a.m./p.m.*] on , 20 in the [*Courthouse/Law Courts*] , Street, , Nova Scotia.

**Contact information**

The applicant designates the following address:

Documents delivered to this address are considered received by the applicant.

Further contact information is available from the prothonotary.

**Signature**

Signed , 20

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of applicant

Print name:

**Counsel’s certificate**

I certify that I am counsel for the applicant.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of counsel

Print name:

**Prothonotary’s certificate**

I certify that this application for adoption with consents was filed with the court on , 20 .

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prothonotary