

ONTARIO

Court File Number

(Name of court)

at
Court office addressForm 34E: Director's Consent to
Adoption**Applicant(s)** (*The first letter of the applicant's surname may be used*)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Child*(Child's full legal name. If the child is in extended society care or was placed by a licensee or children's aid society, you may use an initial for the surname.)*

Date of birth

Sex

Birth registration number

1. My name is *(full legal name)* and I am appointed as a Director under the *Child, Youth and Family Services Act, 2017*.

2. An order was made placing the child in extended society care on *(date)* and was placed into the care of *(full legal name of children's aid society)*

3. I consent to this child's adoption by the applicant(s).

Date of signature

Signature