STATE OF MINNESOTA **COUNTY OF _____**	**DISTRICT COURT** **_____ JUDICIAL DISTRICT** **CASE TYPE: JUVENILE PROTECTION** **COURT FILE NUMBER: _____**

In the Matter of the Welfare of the Child(ren) of: _____, Mother, and _____, [Father] [Adjudicated Father]	**WITHDRAWAL OF CONSENT TO VOLUNTARY** □ **FOSTER CARE PLACEMENT** □ **TERMINATION OF PARENTAL RIGHTS** □ **ADOPTIVE PLACEMENT** **AND DEMAND FOR RETURN OF INDIAN CHILD TO PARENT**

1. I, _____, *(name of parent)* am the *(check one)* □ Birth Mother □ Biological Father □ Presumed Father □ Adjudicated Father □ Indian Custodian of the following child(ren)

   Name: _____ born on _____
   in the *(child's city/state of birth)*_____

   Name: _____ born on _____
   in the *(child's city/state of birth)*_____

   Name: _____ born on _____
   in the *(child's city/state of birth)*_____

2. With respect to the above child(ren), **I withdraw my consent** to *(check one)*:
   □ voluntary foster care placement (withdrawal of consent may be for any reason and done at any time while the child is in placement)
   □ voluntary termination of parental rights (withdrawal of consent may be for any reason and done at any time prior to entry of the final decree terminating parental rights)
   □ voluntary adoptive placement (withdrawal of consent may be done for any reason and at any time prior to entry of the final decree of adoption)

3. **I demand return of my child(ren) to me.** Pursuant to Minn. Stat. § 260.765, subd. 4, if this is a withdrawal of consent to voluntary foster care placement, the agency must return my child(ren) to me within 24 hours of receipt of this demand. Pursuant to ICWA § 1913(c), if this is a withdrawal of consent to voluntary termination of parental rights or voluntary adoptive placement, the agency must return my child(ren) to me as soon as practicable after receipt of this demand.

Dated: _____ _____
Signature of Parent or Indian Custodian
(do not sign unless you are front of a notary)

Subscribed and sworn to before me on
this _____ of _____, 20___.

_____
Notary Public