

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> In the Matter of the Petition of: _____ And _____ Petitioner(s) For the Relinquishment of a Child, _____ (child's name)	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division Courtroom
PETITION FOR <input type="checkbox"/> RELINQUISHMENT OR <input type="checkbox"/> EXPEDITED RELINQUISHMENT PURSUANT TO §19-5-103.5, C.R.S.	

The Petitioner(s) respectfully represent(s) to the Court:

1. _____ (name of child), was born on _____ (date), in _____ (city/state), and is the child of the Petitioner(s).

2. The names, dates of birth, and addresses of the parents of the child are:

Information about the Mother: Petitioner Co-Petitioner/Respondent

Mother's Name: _____ Date of Birth: _____

Street Address: _____

Mailing Address, if different: _____

City: _____ State: _____ Zip Code: _____ Main Phone #: _____

Email Address: _____ Secondary Phone #: _____

Information about the Father: Petitioner Co-Petitioner/Respondent Presumed Alleged

Name: _____ Date of Birth: _____

Street Address: _____

Mailing Address, if different: _____

City: _____ State: _____ Zip Code: _____ Main Phone #: _____

Email Address: _____ Secondary Phone #: _____

Information about the Father: Petitioner Co-Petitioner/Respondent Presumed Alleged

Name: _____ Date of Birth: _____

Street Address: _____

Mailing Address, if different: _____

City: _____ State: _____ Zip Code: _____ Main Phone #: _____

Email Address: _____ Secondary Phone #: _____

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.

6. 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.

8. The Petitioner's decision to relinquish the child named above is knowing and voluntary and without undue pressure or influence from anyone else.

9. 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 Petitioner(s) has/have has/have not received, been promised or offered any payments, gifts, assistants, goods, or services and the source of such payments.

