

Court File Number

(Name of Court)

at

Court office address

**Form 34J: Affidavit of Execution  
and Independent Legal Advice  
(Children's Lawyer),  
sworn/affirmed**

**My name is** (full legal name)

**and I swear/affirm that the following is true:**

1. I am an authorized representative of the Office of the Children's Lawyer in the adoption of:

Full legal name of child	Date of birth (d, m, y) and sex

2. I explained to (minor parent's full legal name) about

- ☐ the nature and effect of adoption under the law of Ontario;
- ☐ the nature and effect of a consent to adoption;
- ☐ the right to counselling;
- ☐ his/her rights and the rights of other persons with respect to the disclosure of adoption information;
- ☐ the right upon request to be advised whether an adoption order has been made,

in language appropriate to his/her age to the best of my knowledge and skills.

3. I also explained that he/she could withdraw the consent within 21 days by a written notice. I gave him/her the address where the written notice would have to be served. I also explained that, after the 21 days had passed, he/she could withdraw the consent only with the court's permission but only if the child had not yet been placed with a person for adoption and if he/she could convince the court that it would be in the child's best interests to have the consent withdrawn.
4. After my explanation, he/she told me that he/she wanted to sign the consent to adoption and I believe that this reflects his/her true wishes.
5. I was present at and witnessed the signing of the consent.

Sworn/Affirmed before me at

municipality

in

province, state, or country

on

date

Commissioner for taking affidavits  
(Type or print name below if signature is illegible.)

Signature

(This form is to be signed in front of a  
lawyer, justice of the peace, notary public  
or commissioner for taking affidavits.)