



Court File Number

.....
 (Name of court)
 at
 Court office address

Form 25C: Adoption Order

Applicant(s)

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).

 Judge (print or type name)

 Date of Order

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The court heard an application of (name of person or persons)

The following persons were in court (names of parties and lawyers in court)

The court received evidence and heard submissions on behalf of (name or names)

The person to be adopted is:

Name before adoption <i>(Give full legal name of person to be adopted, unless the court orders otherwise.)</i>	Date of birth	Place of birth <i>(municipality, province and country)</i>	Sex	Birth registration number

The application is for a(n) (check all boxes that apply):

- | | | | |
|--|-------------------|---|----------------------------|
| adoption of a child in extended society care | licensed adoption | CAS adoption of a child who is not in extended society care | section 199(1)(b) adoption |
| international adoption | relative adoption | stepparent adoption (complete additional section below) | |

THIS COURT ORDERS THAT:

1. The person is adopted as the child of (name of applicant or applicants)
2. The name of the person shall now be (person's full legal name)

To be completed for a stepparent adoption:

As a result of this Order and pursuant to s. 217(2)(b) of the *Child, Youth and Family Services Act, 2017*, the parents of the person are (full legal name of parents)

 Date of signature

 Signature of judge or clerk of the court