

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	NOTICE OF HEARING TO IDENTIFY FATHER AND DETERMINE OR TERMINATE HIS RIGHTS	FILE NO.
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In the matter of _____, adoptee
 adoptee is an Indian child

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TAKE NOTICE: On _____ at _____, in the _____ courtroom,
Date Time

_____ ,
Building Address City State
before _____ , _____ a hearing
Name Title

will be held to determine the identity of the father of the child named above who was born _____
Date

at _____ to _____ ,
City, county, and state Mother's name

who has signed or intends to sign a release or consent permanently giving up her parental rights to the child.
 joined with her spouse in a petition for adoption.

At the hearing the rights of the father shall be determined or terminated. **YOUR FAILURE TO APPEAR AT THIS HEARING SHALL CONSTITUTE A DENIAL OF YOUR INTEREST IN THE CUSTODY OF THE CHILD, WHICH SHALL RESULT IN THE COURT'S TERMINATION OF YOUR PARENTAL RIGHTS TO THE CHILD.**

If you choose to attend this hearing and you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

Date

Deputy clerk

Attorney name and bar no./Agency/Michigan Department of Health and Human Services

Address

City, state, zip Telephone no.

Do not write below this line - For court use only