IN THE SITKA TRIBE OF ALASKA
SITKA TRIBAL COURT

CONSENT TO ADOPTION BY TRIBAL ADULT

Sitka Tribe of Alaska
Sitka Tribal Court
204 Siginaka Way
Sitka, Alaska 99835
(907) 966-9627

In the Matter of the Adoption of:)
_____)
Tribal Citizen Full Name)
STA Enrollment #:
Date of Birth: _____)
) Tribal Court Case No.: _____
)
_____)
Petitioner's Full Name)

I _____, state that I am _____ years of age and that I freely consent to be adopted by the Petitioner(s), _____

_____.

I join in the petition for the specific purpose of giving my consent to the adoption and by giving my signature on this consent, request that the petition be granted.

Dated this _____ day of _____, 20____.

_____
Signature

SUBSCRIBED and SWORN to before me this _____ day of _____, 20____.

SEAL

_____
Tribal Court Clerk or Notary Public Signature

_____
Tribal Court Clerk or Notary Public Printed Name

My Commission Expires: _____