Person Filing:	
Address (if not protected):	
City, State, Zip Code:	
Telephone:	
Email Address:	
Lawyer's Bar Number:	For Clerk's Use Only
Representing Self, without a Lawyer or Attorney for Petitioner OR Re	espondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the matter of:

Case Number: JS

A Minor

WAIVER BY PARENT OF NOTICE OF HEARING AND APPEARANCE ON PETITION FOR TERMINATION OF PARENT-CHILD RELATIONSHIP

UNDER OATH or by AFFIRMATION:

INFORMATION FROM PARENT whose rights are to be terminated

1. I, _____, am the I MOTHER I FATHER of the minor children named below for whom a Petition has been filed requesting permanent termination (severance) of my parental rights:

	Full Name of Child	Date of Birth
2.	My complete name and address and date of birth is as follows:	
Na	ame:	
St	treet Address:	
	ity, State, Zip Code:	
Te	elephone: Date of B	irth:
		(Continues on next page)

Case Number: JS_____

WAIVER OF NOTICE

- 1. I have read the Petition for Termination of Parental Rights between myself and the minor child or children.
- 2. I waive notice of all further proceedings in this matter. I understand that I can reverse this waiver by filing a written document with the court under this court case number declaring that I no longer waive notice of hearings and other court proceedings.

OATH OR AFFIRMATION OF THE PARENT WHOSE RIGHTS ARE TO BE TERMINATED

I have read, understood, and completed the above statements. I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE AND CORRECT to the best of my knowledge, information and belief.

Date		Sigr	nature
Affirmed before me:	(Date)	by	Printed Name
Notary		OR	Michael K. Jeanes, Clerk of Superior Court
My Commission Expires or Seal (below):		on	By Deputy Clerk