



Tennessee Department of Children's Services

SURRENDER OF A CHILD BY A PARENT OR GUARDIAN RESIDING OR TEMPORARILY RESIDING IN A FOREIGN COUNTRY TO TENNESSEE DEPARTMENT OF CHILDREN'S SERVICES OR A LICENSED CHILD-PLACING AGENCY

PART I

PRE-SURRENDER INFORMATION

The following information is required by Tennessee Code Annotated § 36-1-111 and must be obtained under oath by an officer of the United States Foreign Service or an officer of the United States Armed Forces authorized to administer oaths prior to execution of the surrender in PART II by the parent or legal guardian:

Note: Pseudonyms must not be used nor may spaces for the identities of persons whose names are known be left blank. The court shall require the persons executing these documents to prove their identities satisfactorily to the court. T.C.A. § 36-1-111(f).

COUNTRY OF _____)
CITY OR OTHER LOCATION _____)

Being duly sworn according to law, affiant would state:

Being duly sworn according to law, affiant would state:

1. I am:

☐ Mother _____ (Date of Birth) _____ , or
☐ Father _____ (Date of Birth) _____ , or
☐ Legal Guardian _____ (Date of Birth) _____ , of:

2. Child's Name _____
Child's Date of Birth _____
Child's Place of Birth _____
Child's Sex _____
Child's Race _____

3. This child was born in wedlock ☐ / out of wedlock ☐ / in wedlock but the mother's husband is not the child's Biological father ☐.

4. State the names and relationships of any other legal parents, putative fathers, and legal guardians for this child:

a. (1) Name: _____
(2) Relationship to the child: _____
(3) Address: _____

Always check the Forms website for most current version. This form may not be altered.

Distribution: Child Record, Court Record, Parent/Guardian

CS-0846, Rev. 7-23

- (4) City, State, Zip: _____
(5) Telephone Number: Home: _____ Work: _____
(6) Other identifying information concerning the above identified other legal or biological parent/legal guardian.

_____ and

- b. (1) Name: _____
(2) Relationship to the child: _____
(3) Address: _____
(4) City, State, Zip: _____
(5) Telephone Number: Home: _____ Work: _____
(6) Other identifying information concerning the above identified other legal or biological parent/legal guardian.

_____ and

- c. (1) Name: _____
(2) Relationship to the child: _____
(3) Address: _____
(4) City, State, Zip: _____
(5) Telephone Number: Home: _____ Work: _____
(6) Other identifying information concerning the above identified other legal or biological parent/legal guardian.

5. The identity is unknown for the other:

- a. Legal parent Yes ☐ No ☐
b. Biological parent Yes ☐ No ☐
c. Legal guardian Yes ☐ No ☐
d. Not applicable Yes ☐ No ☐

6. The whereabouts is unknown for the other:

- a. Legal parent Yes ☐ No ☐
b. Biological parent Yes ☐ No ☐
c. Legal guardian Yes ☐ No ☐
d. Not applicable Yes ☐ No ☐

7. I state that all information concerning the identity, whereabouts, and social and medical history concerning the above-named legal or biological parent/legal guardian has been(____) or will be given(____) to the Tennessee Department of Children's Services or the Licensed Child-Placing Agency to whom the above child is being surrendered.

Always check the Forms website for most current version. This form may not be altered.

Distribution: Child Record, Court Record, Parent/Guardian

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8. Information Concerning Child's Native American Heritage:

- a. Are you or the child of Native American heritage? Yes ☐ No ☐
 If no, go to # 9.
- b. If yes, are you eligible for tribal membership? Yes ☐ No ☐
- c. If yes, give name of tribe: _____
- d. Are you registered with a Native American tribe? Yes ☐ No ☐
- e. If yes, give name of tribe: _____
- f. Is your child eligible for tribal membership? Yes ☐ No ☐
- g. If yes, give name of tribe: _____
- h. Has your child been registered with a Native American tribe? Yes ☐ No ☐
- i. If yes, give name of tribe: _____
- j. This information is unknown. Yes ☐ No ☐

9. a. Will this child be sent out of Tennessee to another state or country for adoption?
 Yes ☐ No ☐ If no, go to #10.
- b. If yes, name of state or country.

c. If yes, I understand Tennessee law will govern the interpretation of this surrender.

10. Have you been paid, received or been promised any money or other remuneration of thing of value in connection with the birth of the above-named child or placement of this child for adoption?
 Yes ☐ No ☐
 If no, go to #11.
 If yes, please complete the following:

Amount Paid	To Whom	By Whom	Date Received/Paid	Type Service/Cost

11. a. Does the child own any real or personal property? Yes ☐ No ☐ If yes, please describe the property owned and give the property value:

- b. Is it expected that the child will become possessed of any real or personal property? Yes ☐ No ☐
If so, please describe property, who currently owns the property, the time and circumstances under which the child becomes owner and give the property value:

12. a. Do you currently have:

Only legal custody of the child? Yes ☐ No ☐

Only physical custody of the child? Yes ☐ No ☐

Both legal and physical custody of the child? Yes ☐ No ☐

- b. If another person(s) holds legal custody of the child at this time, give the following information:

Name: _____

Relationship, if any, to you or the child: _____

Address: _____

(Street, RR, P.O. Box) (Town/City) (State) (Zip)

Telephone Number: Home: _____ Work: _____

- c. If another person(s) holds physical custody of the child at this time, give the following information:

Name: _____

Relationship, if any, to you or the child: _____

Address: _____

(Street, RR, P.O. Box) (Town/City) (State) (Zip)

Telephone Number: Home: _____ Work: _____

- d. Is the person(s) who holds custody the prospective adoptive parent? Yes ☐ No ☐

- e. If a licensed child placing agency, the Department of Children's Services, or another State agency holds physical and/or legal custody of your child, give the following information:

Name of Agency: _____

Street/Rural Route/P.O. Box: _____

Town/City _____ State _____ Zip _____

- f. Do you intend to give custody to the licensed child placing agency or the Tennessee Department of Children's Services? Yes ☐ No ☐

- g. Explain any other circumstances regarding the custody status of this child:

13. a. Are you aware there may be state assistance- money, classes, health insurance, food aid and such, available to help you if you parent the child yourself? Yes ☐ No ☐
- b. Are you aware there is counseling available if you want to talk to a counselor about your choice before you sign a surrender form? Yes ☐ No ☐
- c. Has such counseling been made available to you? Yes ☐ No ☐
14. a. Do you desire to be represented by legal counsel at this surrender proceeding? Yes ☐ No ☐
- b. If not, do you desire to consult with legal counsel prior to the execution of the surrender of the child? Yes ☐ No ☐
- b. Has such counseling been made available to you? Yes ☐ No ☐
15. Do you understand that if you sign the following surrender of the above-named child that you will have no right to act as parent of the child in any manner forever, that your rights and responsibilities to and with the child will be terminated and that the child will become the legal child of other persons? Yes ☐ No ☐
16. a. If you sign the surrender of the above-named child, do you understand that within three (3) days from the date you sign the surrender, you may revoke or cancel this surrender by signing a paper called a REVOCATION OF SURRENDER before the officer who is here today, or his or her successor? Yes ☐ No ☐
- b. By signing the surrender of the above named child on this date, (Mo/Day/Yr) _____, the period of revocation of the surrender will begin on the day following the signing of the surrender, or (Mo/Day/Yr) _____. The revocation period is three (3) calendar days and will expire on the third (3rd) day or (Mo/Day/Yr) _____. If the three (3rd) day falls on a Saturday, Sunday or legal holiday, the last day for revocation will be the next day which is not a Saturday, Sunday or legal holiday. If this is the situation in this case, that date will be (Mo/Day/Yr) _____. Do you understand this? Yes ☐ No ☐
- c. Do you understand that if you do sign the Revocation of Surrender form within the three (3) day period, the Tennessee Department of Children's Services or Licensed Child-Placing Agency will be required to return the child, if you currently have custody of the child, unless the court finds that to do so will likely result in immediate harm to the health and safety of the child, and that you may contest this decision not to return the child to you and you may have legal counsel to represent you in that proceeding? Yes ☐ No ☐
17. Knowing the above, do you freely, voluntarily and without duress or pressure by any other person(s) desire to surrender the above-named child so that the child may be placed for adoption and adopted by other persons? Yes ☐ No ☐

FURTHER, AFFIANT SAITH NOT.

This the ____ day of _____ 20____.

Signature: Biological ____ Legal ____ Mother _____
Biological ____ Legal ____ Father _____
Legal Guardian of _____ of

Name of Child

Sworn to and subscribed before me this the ____ day of _____, 20____.

Please Print: _____

Name and Title of Officer of the Foreign Service or the United
Armed Forces Authorized to Administer Oaths

Signature: _____

Name and Title of Officer of the Foreign Service or the United
Armed Forces Authorized to Administer Oaths

PART II

A. SURRENDER OF A CHILD TO AND ACCEPTANCE OF THE SURRENDER BY THE DEPARTMENT OF CHILDREN'S SERVICES OR A LICENSED CHILD PLACING AGENCY BY THE PARENT OR GUARDIAN RESIDING OR TEMPORARILY RESIDING IN A FOREIGN COUNTRY

COUNTRY OF: _____)

CITY OR OTHER LOCATION: _____)

Being duly sworn affiant would state:

1. I am:

☐

Mother _____

or

☐

Father _____

or

☐

Legal Guardian _____

of

2. Child's Name _____

Child's Date of Birth _____

Child's Place of Birth _____

Child's Sex _____

Child's Race _____

3. I understand that by my signature to this document, all of my parental or guardianship rights to the child named above will be forever terminated and ended; that this child will be placed for adoption by _____, a Licensed Child-Placing Agency, or ☐ by the Tennessee Department of Children's Services, and that the child will be adopted by other persons, and that I will have no further right to see this child, or to act as parent of this child, or to otherwise be involved in the life of this child.

4. I understand that by signing this document, I will not be entitled to any notice, legal or otherwise, of any other legal proceedings for the adoption of my child by other persons.

5. a. I have read and fully understand Part I of this document and fully understand that if I change my decision to surrender this child I must do so by _____ (Date from # 16b. of Part 1) by presenting the Revocation of Surrender Form, attached to this document, to the officer who is conducting this proceeding, or his or her successor.

b. By my signature to this part, I acknowledge receipt of a copy of the Revocation of Surrender form.

6. I FREELY AND VOLUNTARILY, WITHOUT DURESS OF ANY KIND, SURRENDER ALL OF MY PARENTAL OR GUARDIANSHIP RIGHTS TO _____
TO: _____

(CHILD'S NAME)

a. Licensed Child-Placing Agency _____ (Name of LCPA)

b. ☐ Tennessee Department of Children's Services (Please check if applicable.)

FURTHER AFFIANT SAITH NOT.

This the ____ day of _____. (20 ____).

Signature: Biological __, Legal __ Mother: _____
Biological __, Legal __ Father: _____
Legal Guardian: _____

Sworn to and subscribed before me this the ____ day of _____, (20 ____).

Please Print: _____

Name and Title of Officer of the Foreign Service or the United
Armed Forces Authorized to Administer Oaths

Signature: _____

Name and Title of Officer of the Foreign Service or the United
Armed Forces Authorized to Administer Oaths

***See Notes Below Before Signing**

**NOTES TO THE U. S. FOREIGN SERVICE OFFICER OR OFFICER OF THE UNITED STATES ARMED FORCES
AUTHORIZED TO TAKE THE SURRENDER IN SECTION A:**

1. A minor may complete the surrender to any person eighteen (18) years of age or older.
2. A separate medical/social history form for the child, the child's parent(s) and biological relatives must be completed under oath prior to execution of the surrender. T. C. A. § 36-1-111(j).
3. When applicable, as noted in Section B., all provisions of B. must be completed prior to your signing of the Surrender in Section A. T. C. A. § 36-1-111(j) and (l).
4. Certified copies of Parts I and II must be given or sent to the person(s) executing the surrender and to the licensed child-placing agency or the Tennessee Department of Children's Services, as noted in the Acceptance portion in Part B. Please certify copies of Parts I and II on the page following Part II. T.C.A. 36-1-111(m).
5. The originals of the Surrender forms shall be maintained in a separate file designated for the purpose, shall be confidential and shall not be inspected by anyone else without the written approval of a court with domestic relations jurisdiction where the file is maintained. T.C.A. § 36-1-111(m)

NOTES TO THE COURT IN TENNESSEE WHERE THE SURRENDER IS FILED:

1. Parts I and II of the surrender forms received pursuant to T.C.A. 36-1-111(h) must be filed in the Chancery, Circuit, or Juvenile Court where the child resides or, pursuant to T.C.A. 36-1-111(n)(3), in the court which placed custody with the LCPA or the Tennessee Department of Children's Services, within fifteen (15) days of the actual receipt of the Surrender or within fifteen (15) days of the date the child or persons to whom the child is surrendered become residents of Tennessee whichever is earlier. T.C.A. 36-1-111(n)(1).
2. When applicable, all provisions of Section B. must be completed before entry of an Order of Full or Partial Guardianship. T.C.A. § 36-1-111(j) and (l).
3. The surrender itself is not sufficient to vest custody or guardianship authority with the Licensed Child-Placing Agency (LCPA) or the Tennessee Department of Children's Services. T.C.A. 36-1-111(p)(2). Upon satisfactory completion of the necessary requirements in Section B. below and execution of Parts I and II A. by the parent or legal guardian, the court shall enter an Order of Full or Partial Guardianship for the LCPA or the Tennessee Department of Children's Services. T.C.A. 36-1-111(o)(6)(C). This should be done within thirty (30) days of the filing of the surrender. T.C.A. § 36-1-111(g).

NOTES TO THE CLERK IN TENNESSEE:

1. The copies of the surrender forms filed by the licensed child-placing agency or the Tennessee Department of Children's Services, with this court shall be entered in a special docket for surrenders and shall be styled "In Re _____" and shall be permanently filed by the court in a separate file
(Child's Name)
file for that purpose, and shall be confidential and shall not be inspected by anyone else without the written approval of the court. T.C.A. 36-1-111(m) (1) and (2).
2. Within five (5) days of the filing of the surrender in Tennessee, a certified copy of Parts I and II filed with this court shall be sent, without cost, to: Adoptions Unit, Tennessee Department of Children's Services, 315 Deaderick Street, Nashville, TN 37243. T.C.A. § 36-1-111(m)(1) and (2). Please certify the copies on the page following the certification given by the officer taking the surrender.

PART II

B. ACCEPTANCE OF SURRENDER BY LICENSED CHILD-PLACING AGENCY OR TENNESSEE DEPARTMENT OF HEALTH, OR ITS SUCCESSOR AGENCY

STATE OF _____)
COUNTY OF _____)

Being duly sworn according to law, affiant would state:

1. I, _____, an authorized representative of:
 - a. Licensed Child-Placing Agency _____; or the
 - b. _____ County Tennessee Department of Children's Services, upon _____ execution of Parts I and II A. by the parent or guardian named therein before a U. S. Foreign Service Officer or Officer of the U. S. Armed Forces authorized to administer oaths, accept the surrender of:
 - c. Name of Child _____ . Date: _____

Please Print:

Name and Title of Authorized Representative

Signature:

Signature of Authorized Representative

SUBSECTIONS 2a.-2d. MUST BE MARKED TO DESIGNATE THE APPLICABLE SITUATION. ONE OF THOSE SUBSECTIONS MUST EXIST BEFORE THE SURRENDER CAN BE RECEIVED BY THE U. S. FOREIGN SERVICE OFFICER OR OFFICER OF THE U. S. ARMED FORCES:

2. I _____ certify on behalf of:
Licensed Child-Placing Agency _____ (Name of Agency);
or the: _____ Tennessee Department of Children's Services:
 - a. ____ That my agency has physical custody of this child; or
 - b. ____ That my agency has received the affidavit required by § 36-1-111 (d)(6) concerning the right to receive custody from the surrendering parent or guardian within five (5) days of the date of this surrender. The affidavit of the custodial parent or guardian to that effect has been attached with this acceptance at this time; or
 - c. ____ My agency has the right to receive physical custody of the child upon his or her release from a hospital or health care facility, and the affidavit of the custodial parent or guardian to this effect required by § 36-1-111 (d)(6) has been attached with this acceptance at this time; or

- d. ____ That another person or agency has physical custody of the child. The affidavit of that person or agency required by § 36-1-111 (d)(6) which indicates their waiver of the right to custody of the child upon entry of an order of guardianship pursuant to § 36-1-136(o) has been attached with this acceptance at this time.

SUBSECTIONS 3. AND 4. MUST BE ANSWERED "YES" OR MUST BE MARKED "NOT APPLICABLE" BEFORE THE SURRENDER IS COMPLETED BY THE U. S. FOREIGN SERVICE OFFICER OR OFFICER OF THE U. S. ARMED FORCES.

3. Yes ☐ No ☐ That if the Indian Child Welfare Act, 25 U.S.C. § 1901 et seq., applies because of the child's Native American heritage, there has been compliance with the Act. ☐ Not Applicable.

4. Yes ☐ No ☐ **(Licensed Child-Placing Agency Only)** I have presented to the court a copy of the Interstate Compact on the Placement of Child Form for a child brought into Tennessee for adoption or foster care. If the ICPC Form is not available, explain why this is not required.

☐ Not Applicable

FURTHER AFFIANT SAITH NOT.

This ____ day of _____, 20 ____.

Please Print:

Name and title of authorized representative of Tennessee Department of
Children's Services or a Tennessee Licensed Child-Placing Agency

Signature: _____

Sworn to and subscribed before me this ____ day of _____, 20 ____.

NOTARY PUBLIC

My commission expires: _____.

**CERTIFICATION OF U. S. FOREIGN SERVICE OFFICER
OR OFFICER OF THE UNITED STATES ARMED FORCES**

I, _____, ____an Officer of the U. S. Foreign Service or ____an Officer of the United States Armed Forces, hereby certify the foregoing copies of Parts I and II of the Surrender Forms to be true and accurate copies of the documents executed and filed with me.

Name and Title of U. S. Foreign Service Officer or
Officer of the United States Armed Forces

CERTIFICATION OF TENNESSEE CLERK

I, _____, Clerk of the _____ Court of
_____ County, Tennessee, certify the foregoing copies of Parts I and II of the
Surrender Forms to be true and accurate copies of the documents filed with this Court.

Clerk of the _____ Court of
_____ County, Tennessee.

(Seal)

PART III

REVOCATION OF SURRENDER BY A PARENT OR GUARDIAN

COUNTRY _____

CITY OR OTHER LOCATION _____

Being duly sworn according to law affiant would state:

1. I am:

☐ Mother _____ or
☐ Father _____ or
☐ Legal Guardian _____ of

2. Child's Name _____
Child's Date of Birth _____
Child's Place of Birth _____
Child's Sex _____
Child's Race _____

3. On _____ (Date), I executed a surrender of my parental or guardianship rights to the child named in #2 to:

a. Prospective Adoptive Parent(s) _____
b. Licensed Child-Placing Agency _____
c. Tennessee Department of Children's Services _____

4. The surrender was executed before: _____
(Name of U.S. Foreign Service Officer or Officer of the U.S. Armed Forces)

5. I hereby revoke and void the surrender of the above-named child.

FURTHER AFFIANT SAITH NOT.

This the ____ day of _____, 20__.

Signature: Biological ____ Legal ____ Mother _____
Biological ____ Legal ____ Father _____
Legal Guardian: _____

Sworn to and subscribed before me this ____ day of _____, 20__.

This Revocation of Surrender was received by me on the ____ day of _____,
20__.

Please Print: _____

U.S. Foreign Service Officer or Officer of the U.S. Armed Forces

Signature (See notes below): _____
U.S. Foreign Service Officer or Officer of the U.S. Armed Forces

NOTES TO COURT, OR OTHER PERSON AUTHORIZED TO RECEIVE A REVOCATION, AND TO THE CLERK:

1. If the judge or other person who received the surrender is unavailable or absent, the successor or substitute to that judge or person may accept the revocation, or in the absence of the judge or his or her successor, another judge with jurisdiction to receive a surrender (in another state or territory this would be the chancellor, judge, or clerk of a court of record) may accept the revocation. In the event the surrender was taken in another state or country, or before the warden of a state or federal penitentiary and there is no authorized successor to the person who received the surrender or that person is unavailable, the revocation may be taken by a court in Tennessee which is qualified to receive a surrender or by a court in another state, territory, or country with domestic relations jurisdiction to accept the revocation. T.C.A. § 36-1-112(b)(3).
2. The surrender must be revoked within three (3) days including Saturdays, Sundays and legal holidays following the original execution of the surrender. T.C.A. § 36-1-112(b)(3). The revocation period will begin on the day following the signing of the surrender and will expire on the three (3rd) day. If the three (3rd) falls on a Saturday, Sunday or legal holiday, the last day for revocation will be the next day which is not a Saturday, Sunday or legal holiday.
3. The court or person receiving the revocation shall maintain the originals in the office of the clerk or the person receiving the surrender together with the original of the surrender or the adoption petition containing the parental consent, if available, and shall personally give, or by certified mail, return receipt requested, send certified copies of the revocation to the child's parent(s) or legal guardian(s), and to the prospective adoptive parents or the local office of the Tennessee Department of Children's Services, or the licensed child-placing agency to whom the child was surrendered. See, T.C.A. § 36-1-112(m).
4. a. A certified copy of the revocation shall be attached to a certified copy of the surrender or the petition for adoption containing the parental consent, and the clerk shall send these, within five (5) days by certified mail, return receipt requested to:

Tennessee Department of Children's Services
State Office
Adoption Services
315 Deaderick Street, 9th Floor
Nashville, TN 37243

See, T.C.A. § 36-1-112(m).

- b. Please provide the certification on the page following this Revocation form.
5. If the revocation must be executed before a court or person before whom the surrender was not executed or in which the adoption petition was not filed, the original of the revocation shall be sent within three (3) days to the court or person before whom the surrender was executed or where the adoption petition was filed and that court or person shall be responsible for sending the forms to the Tennessee Department of Children's Services state office and to the persons or agencies in #3 entitled to copies of the revocation. See, T.C.A. § 36-112(m).

CERTIFICATION

I, _____, U.S. Foreign Service Officer/Officer of the U.S. Armed Forces of (please state location) _____, certify the foregoing copy of the Revocation of Surrender to be a true and accurate copy of the Revocation of Surrender executed before me.

United States Foreign Service Officer or Officer of the
United States Armed Forces



Tennessee Department of Children's Services

Request for Redaction Introduction

I am the biological parent of the adopted person and the adopted person is less than 6 months old, at the time of this request for redaction is executed.

I understand that identifying information regarding me may be requested by certain classes of eligible persons who, as may be permitted by law, may have access to the sealed records, sealed adoption records or post adoption records and those records in any other information source.

I **DO NOT** wish for my identifying information to be shared and request that my identifying information be redacted from the sealed records, sealed adoption records, and post-adoption records before the release to eligible persons.

I understand that I may rescind this request by submitting a written, sworn, notarized, statement requesting such rescission [T.C.A §36-1-127(e)(3)] to:

**POST ADOPTION SERVICES UNIT
TENNESSEE DEPARTMENT OF CHILDREN'S SERVICES
UBS Tower, 9th FLOOR
315 Deaderick Street
NASHVILLE, TENNESSEE 37243**

Biological Parent's Printed Name

Biological Parent's Signature

Sworn to and subscribed before me this _____ day of _____, 20_____

Notary Public



Tennessee Department of Children's Services

Redaction Application

Section 1: Information About You

Your Present Last Name:		Your Relationship To Adopted Child				
Your Maiden Name						
Your Previous Last Names						
Your First & Middle Name						
Your Date of Birth	Your Place of Birth					
/ /	County		City		State	
Your Mailing Address						
	City		State		Zip Code	
Your Telephone Numbers	Home/Cell			Business		
	() -			() -		
	Area Code Number			Area Code Number		

Section 2: Information About Adopted Person

(If you do not know an answer, please write "Unknown" in the blank)

Last Name of Child (Before Adoption)					
First and Middle Names of Child				Sex of Child:	<input type="checkbox"/> F <input type="checkbox"/> M
Child's Date of Birth	Child's Place of Birth				
/ /	County		City		State
Full Name of Child's Birth, Legal or Alleged Father:					
Full Name of Child's Birth Mother:					

Please make a copy for the biological parent upon completion and place the original copy with the completed surrender packet.

OFFICIAL USE ONLY					
Received Request for Redaction in DCS Post Adoption Services Unit	Day		Month		Year
Received Revocation of Request for Redaction	Day		Month		Year
Authority: T.C.A. § 36-1-127(e)(3); Section 13 of Public Chapter 1079 (1996); Public Chapter 1068 (1996); Public Chapter 1054 (1996), T.C.A. §§ 36-1-101 et seq.					