

Name, Address & Phone Number
(If Attorney filing, type Name, Address & Phone Number)

Petitioner(s), Pro Se
 Attorney for Petitioner(s)

**IN THE FAMILY COURT OF THE SECOND CIRCUIT
STATE OF HAWAII**

In the Matter of Adoption of) FC-A NO. _____
A MALE FEMALE)
Born on:)
A MALE FEMALE) NOTICE OF TIME AND
Born on:) PLACE OF HEARING
A MALE FEMALE) (By Mail or Personal Service
Born on:) Without the State)
A MALE FEMALE)
Born on:)
by)
)
)
)
[] the legal spouse of [] and)
)
)
[] the child(ren)'s legal parent)
[] husband and wife [] civil union partners)
[] an unmarried person)
)
_____ Petitioner(s))

NOTICE OF TIME AND PLACE OF HEARING
(By Mail or Personal Service Without the State)

THE STATE OF HAWAII TO:

Name and Address of Non-Consenting Parent/Legal Custodian

YOU ARE HEREBY NOTIFIED that the attached Petition for Adoption has been filed in the Family Court, Second Circuit, State of Hawai`i. Information regarding the child(ren) to be adopted are as follows:

<u>FULL NAME OF CHLD</u>	<u>SEX</u>	<u>BIRTHDATE</u>
_____	[] MALE [] FEMALE	_____
_____	[] MALE [] FEMALE	_____
_____	[] MALE [] FEMALE	_____
_____	[] MALE [] FEMALE	_____

THE PETITION ALLEGES that your consent to the adoption of the above-named child(ren) by the Petitioner(s) above-named is not required and may be dispensed with pursuant to Hawai`i Revised Statutes Section 578-2 (c) as amended.

A hearing on the Petition will be held on _____ at _____ m. at the Family Court, Hoapili Hale, 2145 Main Street, Wailuku.

IF YOU FAIL to appear at the hearing on date and time and at the place noted above or if you fail to file a written response to the allegations reflected in the Petition for Adoption, further action may be taken including the granting of the adoption without further notice to you. Your written response should be addressed to the Presiding Judge, Family Court, Second Circuit, Hoapili Hale, 2145 Main Street, Wailuku, Hawai`i 96793.

FAILURE TO OBEY this notice may result in an entry of a default and default judgment against you.

YOU ARE FURTHER NOTIFIED that the child, the adoptive parents and the natural parents have rights under H.R.S. Section 578-15 regarding confidentiality of adoption records after the child reaches age 18.

DATE

SIGNATURE OF THE CLERK

THIS NOTICE SHALL NOT BE PERSONALLY DELIVERED BETWEEN 10:00 P.M. AND 6:00 A.M. ON PREMISES NOT OPEN TO THE PUBLIC, UNLESS A JUDGE OF THIS COURT PERMITS, IN WRITING ON THIS NOTICE, PERSONAL DELIVERY DURING THOSE HOURS.



In accordance with the Americans with Disabilities Act, as amended, and other applicable state and federal laws, if you require an accommodation for a disability, please contact the ADA Coordinator at the Family Court Administration Office at PHONE NO. 244-2700, FAX 244-2704 OR email adarequest@courts.hawaii.gov at least ten (10) working days before your proceeding, hearing or appointment date.