

Ohio Department of Children and Youth
STATEMENT OF ASSURANCE
 (Ohio Revised Code Section 2151.39 and Section 5103.20)

SECTION 1: PRIVATE AGENCY OR COURT INTERSTATE PLACEMENT
 (FOR USE BY PRIVATE CHILD PLACING AGENCIES AND COURTS)

The (agency or court) _____, having legal custody or jurisdiction of the
 minor (child's name) _____ born on _____, intends to place this child for
 (type of placement) _____ with (placement resource) _____
 located at (resource address) _____ I/we request consideration for placement
 of this child into another state and assure the Ohio Department of Children and Youth (DCY) that if this placement is
 approved and made I/We will retain responsibility for this child, including financial responsibility for returning him to Ohio
 if requested to do so by DCY until the child attains majority, is legally adopted or is discharged from my/our care, custody
 or jurisdiction with the consent of the appropriate authorities in the state into which he is placed.

Signature of Authorized Agency or Court Representative	Title	Date Signed
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SECTION 2: INDEPENDENT NON ADOPTIVE INTERSTATE PLACEMENT
 (FOR USE BY PARENT(S) OR INDIVIDUAL(S) HOLDING LEGAL GUARDIANSHIP)

I/We, the undersigned parent(s) or individual(s) holding legal guardianship of a minor (child's name)
 born on _____, intend to place this child for (type of placement) _____ with (placement resource)
 located at (resource address) _____
 I/we request consideration for placement of this child into another state and assure the Ohio Department of Children and
 Youth (DCY) that if this placement is approved and made, I/we will retain responsibility for this child, including financial
 responsibility for returning him to Ohio if requested to do so by DCY until the child attains majority or is discharged from
 my/our care, custody, or responsibility with the consent and approval of the appropriate authorities in the state into which he
 is placed.

Signature of Parent/Guardian	Date Signed	Signature of Parent/Guardian	Date Signed
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SECTION FOUR (4) MUST ALSO BE COMPLETED.

SECTION 3: INDEPENDENT ADOPTIVE INTERSTATE PLACEMENT
 (FOR USE BY PARENT(S) OR INDIVIDUAL(S) HOLDING LEGAL GUARDIANSHIP)

I/We, the undersigned parent(s) or individual(s) holding legal guardianship of a minor (child's name)
 born on _____, intend to place this child with (adoptive family)
 located at (adoptive family's address) _____
 I/we assure the Ohio Department of Children and Youth (DCY) that I/We propose this adoptive placement of my/our own
 free will, and that I/We have been offered or received no inducement to part with this child in regards to this placement.
 I/We, request consideration for adoptive placement of this child into another state and assure DCY that if this placement
 is approved and made I/We will retain responsibility for this child, including financial responsibility for returning him to
 Ohio if requested to do so by DCY at any time until the adoption is finalized. I/We agree to promptly remove the child from
 the state into which he is placed if requested to do so by DCY at any time until the adoption is finalized.

Signature of Parent/Guardian	Date Signed	Signature of Parent/Guardian	Date Signed
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SECTION FOUR (4) MUST ALSO BE COMPLETED.

SECTION 4: NOTARIZATION
 (REQUIRED ONLY IF SECTION 2 OR SECTION 3 IS COMPLETED)

Notarization for: Independent Non-adoptive Interstate Placement	Independent Adoptive Interstate Placement
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Before me personally appeared (Print Name) _____ and (Print Name) _____ known to me to be
 the person(s) whose name(s) is/are subscribed to this document and acknowledge that he/she/they (Circle One) executed this document.

Signed in my presence this _____ day of _____, 20_____

Notary Public in and for _____ County, State of Ohio.

Signature of Notary Public _____ Date Signed _____