Notice to the Adoption Authority of Ireland under Section 16(1) and (2) of the Adoption Act 2010 by a father or relevant non-guardian of a child who wishes to be consulted in relation to a proposal by the CFA/accredited body to place the child for adoption or on application by the mother, step-parent or a relative of the child for an Adoption Order relating to the child. (Please use BLOCK capitals)

1. Name and address:			
	Month		
3. Name of child:			
	expected date of delivery: Day		
5. Relationship to the child	d:		
6. Name and address of m	other:		
7. Name CFA/accredited b	ody (if known):		
	oplicant(s), (if known), and relation		
	of		
	credited body to place the child re nother, step-parent or a relative of		•
Authority of Ireland may h	accredited body may, in the future have received from the father or re our contact details will be referred	levant non-guardia	n of a child proposed for
Signed:			
Date:	Telephone Number(s)		

## Please return this form along with a photocopy of a photo ID to:

The Adoption Authority of Ireland, Shelbourne House, Shelbourne Rd, Ballsbridge, Dublin 4, D04 H6F6

## **Privacy Statement**

The Adoption Authority of Ireland will treat all information and personal data that you provide as confidential, in accordance with the General Data Protection Regulation and Data Protection Legislation.