

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 6: Court Section 13: Voluntary Termination of Parental Rights	
	Effective Date: July 1, 2025	Version: 8

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POLICY OVERVIEW

A Petition for Voluntary Termination of Parental Rights (TPR) is filed when it is determined to be in the child's best interest, a parent(s) is in agreement, and will help the child reach permanency. The ultimate goal in permanency is to provide a safe and nurturing home, and for a child to develop and sustain meaningful relationships.

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PROCEDURE

The Indiana Department of Child Services (DCS) will accept a signed Voluntary Relinquishment of Parental Rights form from a parent or alleged parent who gives the completed form to DCS. By signing the Voluntary Relinquishment of Parental Rights, the parent does not waive right to be served notice of the related court proceedings. However, the parent or alleged parent does waive the right to notice of a Voluntary TPR Hearing. The parent's rights are not actually terminated by the signing of the form.

Note: A Voluntary Relinquishment of Parental Rights form or adoption consent must not be taken from a mother of a newborn within the first 48 hours after the child's birth.

DCS will maintain contact with the parent or alleged parent unless rights are terminated, which may occur at any time after a Petition to Voluntarily TPR is filed with the signed form attached. DCS will evaluate and determine whether it is in the best interest of the child to file a Petition for Voluntary TPR based on the parent's/alleged parent's signed Voluntary Relinquishment of Parental Rights form.

Note: An Initial Hearing must be held within 30 days from the date the Petition for Voluntary TPR is filed

The Family Case Manager (FCM) will:

1. Refer parents or alleged parent to communicate their desire to pursue Voluntary TPR with their attorney;

Note: DCS should not obtain signatures on the Voluntary Relinquishment of Parental Rights form without the knowledge and presence of the parent or alleged parent attorney, if they have one. Once signed, this form cannot be undone unless the consent

was given under fraud or duress, or if the parent was found to be incompetent at the time of signing.

2. Consult with the FCM Supervisor, the Division Manager (DM) or DCS Local Office Director (LOD), and the DCS Staff Attorney to determine if voluntary TPR is in the best interest of the child, and document the outcome in the case management system;
3. Ask the parent, guardian, or custodian if there is a need for a reasonable accommodation due to a disability;
4. Develop a plan for next steps for voluntary TPR with the FCM Supervisor, DM or LOD, and the DCS Staff Attorney, if determined to be in the child's best interest;
5. Recruit and/or identify a qualified prospective adoptive family for the child, including relatives who may be willing to adopt;
6. Once a prospective adoptive family has been identified and TPR has been initiated, submit a completed Indiana Adoption Program Application Title IV-E Adoption Assistance Program (AAP) or State Adoption Subsidy (SAS) and supporting documentation for an adoption subsidy eligibility determination to the DCS Central Eligibility Unit (CEU) (see policy 10.15 Eligibility Requirements for Adoption Assistance);
7. Enter the hearing and decree date of the petition in the case management system;
8. Request that the parent complete the Indiana Adoption Medical History Registry;
9. Ensure that any adoption petition, notice that an adoption has been filed, or adoption decree is provided to the DCS Staff Attorney upon receipt;
10. Schedule a final "goodbye visit" between the child and the parents, if appropriate (see policy 10.02 Assessing the Child's Readiness for Adoption). If the child is participating in therapy, attempt to arrange the visit so the therapist can be present; and
11. Update the reason for lack of parental support and care in the case management system to reflect that the parent's rights have been terminated.

The FCM Supervisor will:

1. Meet with the FCM, DCS Staff Attorney, and LOD or DM to determine whether it is in the child's best interest to move forward with the voluntary TPR process and plan for next steps;
2. Assist the FCM in preparing for the voluntary TPR process if Voluntary TPR is determined to be in the child's best interest; and
3. Ensure information is entered in the case management system in a timely manner.

The DM or LOD will:

1. Meet with the FCM, FCM Supervisor, and DCS Staff Attorney to determine whether it is in the child's best interest to move forward with the Voluntary TPR process and plan for next steps; and
2. Sign the agency's Consent to Adoption form for cases for which filing of the Voluntary TPR process is deemed appropriate and a prospective adoptive parent has been identified, and:
 - a. The negotiations for Adoption Subsidy have been negotiated and finalized (see policy 14.08 Negotiations for Adoption Assistance), and
 - b. One (1) of the following has occurred for each parent or alleged parent with a claim to the child:
 - i. The period of appeal of the final TPR order has passed,
 - ii. Any final appellate opinion related to the TPR has been certified and the period for appeal has passed on any issues remanded to the juvenile court, or
 - iii. Adoption consents have been signed by all parties with a legal or potential legal claim to the child.

4. Email the DCS Staff Attorney assigned to the adoption case that the Consent to Adoption form has been signed.

The DCS Staff Attorney will:

1. Staff with the FCM, FCM Supervisor, DM or LOD, and any other appropriate individual to determine if voluntary TPR is in the child's best interest and plan for next steps;
2. Appropriately store the parent's or alleged parent's signed Voluntary Relinquishment of Parental Rights form if voluntary TPR is determined NOT to be in the child's best interest so that it may be easily located if voluntary TPR is determined to be in the best interest of the child in the future;
3. Prepare and file the Petition for Voluntary TPR with the signed Voluntary Relinquishment of Parental Rights form and an attached copy of the child's court approved Permanency Plan if voluntary TPR is determined to be in the child's best interest;

Note: An Initial Hearing must be held within 30 days from the date the Petition for Voluntary TPR is filed.

4. Provide service of process to the parent as done on any other case.
5. Represent DCS at the Voluntary TPR Hearing;
6. Communicate with the FCM and FCM Supervisor regarding the outcome of the Voluntary TPR Hearing and next steps;
7. Meet with the FCM, FCM Supervisor, LOD, as appropriate, to determine next steps if or when DCS receives notice of an adoption petition being filed; and
8. Meet with the FCM and FCM Supervisor to discuss challenging an adoption decree if DCS did not receive notice of an adoption before the adoption was granted.

Note: Any challenge to an adoption decree in a case where DCS did not have notice of the adoption must be filed within 45 days of the date the decree was issued.

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RELEVANT INFORMATION

Definitions

N/A

Forms and Tools

- [Consent to Adoption \(SF 12582\)](#)
- [Indiana Adoption Medical History Report \(SF 9966\)](#)
- [Voluntary Relinquishment of Parental Rights \(SF 12587\)](#)

Related Policies

- [10.02 Assessing the Child's Readiness for Adoption](#)
- [14.08 Negotiations for Adoption Assistance](#)

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LEGAL REFERENCES

- [IC 31-10-2-3: Rights of persons with a disability](#)

- [IC 31-17-2-8.1: "Disability"; custody](#)
- [IC 31-35-1: Chapter 1. Voluntary Termination of Parent-Child Relationship by Parents](#)
- [IC 31-35-1-6: Consent; written denial of paternity or consent to termination of relationship before birth of child bars challenge to adoptions or termination of parental rights](#)
- [IC 31-35-1-8: Advice to parents](#)
[42 USC 12102: Definition of disability](#)

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PRACTICE GUIDANCE- DCS POLICY 6.13

Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.

N/A

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