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STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

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IN THE INTEREST OF

\_\_\_\_\_  
Name

**Certificate to  
Delegation of Powers under  
§48.979, Wis. Stats., of an Indian Child**

\_\_\_\_\_  
Date of Birth

Case No. \_\_\_\_\_

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A Consent to Delegation of Powers of an Indian Child was filed by [Parent Name] \_\_\_\_\_  
on [Date] \_\_\_\_\_.

I certify that I am the judge of the circuit court of \_\_\_\_\_ County, State of Wisconsin, a court of record. The above named parent appeared before me on this date. The terms and consequences of the delegation of powers, including the limitation on withdrawing the consent, have been fully explained in detail and were fully understood by the parent, and I found this consent to be informed and voluntary before I accepted it.