

**FORM 6**

*(Child and Youth Well-Being Act, S.N.B., 2022, c.35, s.57(2))*

Department of Social Development  
Province of New Brunswick

**ACKNOWLEDGEMENT WITH RESPECT TO LEGAL ADVICE**

Name of Parent(s): .....

Address: .....

The above-named parent(s) is/are the lawful guardian(s) of the following child/children or youth:

Name of child or youth: .....

Date of birth: .....

Name of child or youth: .....

Date of birth: .....

Name of child or youth: .....

Date of birth: .....

The above-named parent(s) acknowledge(s) that the Minister of Social Development has advised the parent(s) to obtain legal advice before entering into the guardianship agreement regarding the above-named child/children or youth.

The above-named parent(s) acknowledge(s) that they *(check one box)*:

has/have received legal advice; or

has/have made a decision to dispense with legal advice.

.....  
(date) (signature of witness) (Minister of Social Development)

per: .....

.....  
(date) (signature of witness) (signature of parent)

.....  
(date) (signature of witness) (signature of parent)