## **Judicial Bypass Instructions**

In Oklahoma, if you are under the age of 18 and seeking an abortion, the abortion clinic is required to notify one of your parents or legal guardian about your abortion. The parent or legal guardian must consent to you having an abortion. If you do not want your parent or legal guardian to be notified or consent to an abortion, you can ask a court to grant you a "Judicial Bypass." This bypass will allow you to "bypass" the parental notification and consent law.

### **INSTRUCTIONS**

- 1) Find the district court in the county where you live. The district courts are listed at <a href="http://www.oscn.net/courts/">www.oscn.net/courts/</a>.
- 2) You may represent yourself or an attorney will be appointed to you free of charge. This attorney will be looking out for you and no one else. This attorney will not contact your parent or Guardian.
- 3) Fill out this Petition, make two copies, and take all copies to the court clerk. YOU CAN SIMPLY CHECK THE BOX REQUESTING AN ATTORNEY, SIGN THE FORM AND GIVE IT TO THE COURT CLERK. YOUR ATTORNEY CAN HELP YOU FILL OUT THE REST.
- 4) You do not have to pay any fees for filing this form.
- 5) A hearing will be scheduled. The hearing is confidential and will be given priority over other cases. At this hearing the Judge will ask you questions under oath (this means you promise to tell the truth).
- 6) Do not be alarmed if the court requires you to have an evaluation and counseling session. This is normal.
- 7) The Judge may appoint a guardian for you to give consent for the abortion.
- 8) If the Judge gives you permission to get an abortion, you must take the original Order (the paper the Judge signs) to the physician who will perform the abortion.
- 9) If the Judge does not give you permission to get an abortion, you may appeal your case.

PETITION FOR JUDICIAL AUTHORIZATION OF ABORTION WITHOUT PARENTAL NOTIFICATION Pursuant To 63 O.S. § 1-740.3	District Court of Cou State of Oklahoma Case No (no filing fee required)	nty,	
CONFIDENTIAL			
Petitioner       First     Middle			

### THESE PROCEEDINGS ARE CONFIDENTIAL AND ARE NOT TO BE DISCUSSED OR DISCLOSED WITH ANYONE OTHER THAN THE PETITIONER AND HER COUNSEL OR GUARDIAN AD LITEM.

### RIGHT TO COURT-APPOINTED COUNSEL, PURSUANT TO 63 O.S. §1-740.3(B)

If you need help filling out the rest of this form and getting through the legal process you can request

the court to appoint an attorney for you.

I request that the court appoint an attorney for me.	YES 🗌	NO 🗌
--	-------	------

Petitioner, being sworn, states:

is filed, and my address is \_\_\_\_\_

I am a person less than eighteen years of age who is not or has not been married or is under the care, custody and control of my parent or parents, guardian or juvenile court of competent jurisdiction. (Definition of unemancipated minor according to 63 O.S. § 1-740.1)

YES NO

# I AM MAKING THE FOLLOWING STATEMENTS TO SATISFY 63 O.S. §1-740.3(A):

I.	Ex	xperience Level		
	1.	My date of birth is:		
	2.	I am currently in grade at		
	3.	I am currently enrolled in (choose one) general advanced special education classes.		
	4.	My work experience outside of the home includes:		
	5.	I currently live with my parent guardian conservator. My living situation is described below:		
	6.	I DO DO NOT handle my own finances. Examples of this include:		
	7.	I have made significant decisions on my own. Examples of such decisions include:		

### II. Perspective

1. I have taken the following steps to explore options concerning this pregnancy:

I HAVE HAVE NOT considered and weighed the potential consequences of each option.
 My explanation is below:

### III. Judgment

- 1. I learned about my pregnancy on the following date: \_\_\_\_\_
- 2. My behavior since learning of my pregnancy is described below:

3. I DO DO NOT understand my options concerning my pregnancy. My explanation is below:

- 4. I have been given the following information required by O.S. 63 §1.738.2:
  - a. The name of the physician who will perform the abortion. YES  $\square$  NO  $\square$
  - b. The medical risks associated with the particular abortion procedure to be employed.

YES NO

c. The probable gestational age of the unborn child at the time the abortion is to be performed.

YES 🗌 NO 🗌

- d. The medical risks associated with carrying the child to term. YES  $\square$  NO  $\square$
- e. The ultrasound imaging and heart tone monitoring that enable me to view the unborn child or listen to the heartbeat of the unborn child is available to me.

YES 🗌 NO 🗌

- f. That medical assistance benefits may be available for prenatal care, childbirth, and neonatal care. YES NO
- g. That the father is liable to assist in the support of the child, even in instances in which the father has offered to pay for the abortion. YES 🗌 NO 🗌
- h. That I have the option to review printed materials and or view the website
   www.awomansright.org, provided by the State Board of Medical Licensure and
   Supervision, which describe the unborn child and lists agencies that offer alternatives to
   abortion. YES NO
- I have chosen to view the printed materials and/or viewed the website,
   www.awomansright.org, which provides geographically indexed materials designed to inform women of public and private agencies that are available to assist a woman through pregnancy, upon childbirth, and while the child is dependent. YES 
  NO

- j. I have chosen to view the printed materials and/or viewed the website,
   www.awomansright.org, designed to inform women of the probable anatomical and
   physiological characteristics of the unborn child at two-week gestational increments
   from the time when a woman can be known to be pregnant to full term. YES NO
- 5. I am making an informed decision concerning my pregnancy. YES 🗌 NO 🗌

I am requesting this order for the following reasons (place a check mark beside all that apply):

\_\_\_\_\_ I am mature enough to decide to have an abortion without telling my parent(s) guardian or juvenile court. I also know enough about abortion to make this decision.

\_\_\_\_\_ Telling my parent(s), guardian or juvenile court that I want an abortion is not in my best interests.

\_\_\_\_\_ Telling my parent(s), guardian or juvenile court that I want an abortion may lead to physical, emotional or sexual abuse of me.

#### VERIFICATION

I, \_\_\_\_\_\_, being sworn on oath, state: I have read the above foregoing document and understand the meaning thereof, and declare, under penalty of perjury, that the facts and statements contained herein are true to the best of my knowledge and belief.

I, \_\_\_\_\_\_, ask this Court to authorize a physician to perform an abortion to terminate my pregnancy, without requiring the written notification and consent of my parent, guardian, or another juvenile court.

Signature