



**Declaration of Minor Regarding Eligibility for Emancipation Exemption Section  
390.01114(3)(b)(3), F.S.**

I, \_\_\_\_\_, declare as follows:

1. I am a minor who is less than 18 years of age.
2. On \_\_\_\_\_, I received a court order from  
the state of \_\_\_\_\_ determining that the removal of  
the disabilities of nonage (emancipation) was in my best interest. The order stated that I was  
an adult for purposes of all criminal and civil laws of the state and provided me with the  
authority to exercise all of the rights and responsibilities of a person who is 18 years of age or  
older.
3. I requested to be emancipated because \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I state that according to my best knowledge, information and belief, that the above information is true, accurate and correct.

Signature of Minor: \_\_\_\_\_

Printed Name of Minor: \_\_\_\_\_

DATED in \_\_\_\_\_ County, Florida, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.