



# Waiver of Home Study and Placement Report Instructions

According to OAR 413-140-0035 and 413-140-0040(5) the Department of Human Services (DHS) may file a waiver of the home study required under ORS 109.309(5)(a)(C) and placement report required under ORS 109.309(8) under the following circumstances:

1. The petition is to adopt the stepchild of one the petitioners, and
  - a. The petition has been served on all persons whose consent is required under ORS 109.312; **and**
  - b. The petition has been served on each of the child's grandparents who has established rights under ORS 109.119, if the names and addresses are known or can be readily determined by the petitioners; **or**
2. One of the petitioners is the grandparent, aunt, uncle or adult sibling of the child, **and**
  - a. The child has resided with the petitioners on a continuous basis since birth for at least six months or if an older child, for one or more years immediately prior to the filing of the adoption petition.
3. One of the petitioners is the biological or adoptive parent; co-petitioner and the parent are *not* married.
4. One of the petitioners is the biological parent; child is brought to term and delivered by a gestational carrier.
5. The petitioners and/or child are currently receiving services from DHS Office of Safety and Permanency for Children (OSPC) or have received such services within the last 12 months.

**Moreover, petitioners must meet the following conditions:**

- a. Each adoptive applicant (except birth and/or legal parent(s)) and all members of the applicant's household who are over 18 years of age must submit to a current Oregon criminal records check and provide an official copy of such information to Department of Human Services [OAR 413-140-0065] (form attached); **and**
- b. The adoption petition must declare the child's connection with Oregon in accordance with ORS 109.741; **and**
- c. The adoptive applicants are not providing full time physical care for more than **eight** children, including biological, foster or adoptive children [OAR 413-140-0055].

Please send **the Request For Oregon Criminal History Information** and a check in the amount of \$10.00 for each household member over the age of 18 to:

**Oregon State Police  
Identification Services Section, Unit 11  
P.O. Box 4395  
Portland, Oregon 97208-4395**

*\*\* This process takes approximately  
three (3) weeks from date of mailing\*\**

Please complete the attached **Waiver Request Form** and submit it to the DHS along with copies of all documentation filed with the court.

**Send by registered or certified mail to:**

Department of Human Services  
**Attention:** Independent Adoptions  
500 Summer Street NE, E71  
Salem, Oregon 97301-1068



# Request for Waiver of Home Study and Placement Report

Petitioner(s): \_\_\_\_\_

In the Matter of the Adoption of: \_\_\_\_\_

Court and Case Number: \_\_\_\_\_

1. The Petitioner(s) listed above hereby request a waiver of the home study and placement report requirement because:

- a)  The Petition is to adopt the stepchild of one of the petitioners (step-parent adoption).
- b)  One of the petitioners is a grandparent, aunt, uncle or adult sibling of the child(ren) to be adopted and the child(ren) have resided with the relative for 6 months since birth, or for one year continuously if child is older than 6 months (relative adoption).
- c)  One of the petitioners is the biological or adoptive parent of the child(ren) to be adopted and retaining parental rights (co-parent adoption).
- d)  One of the petitioners is the biological parent of the child brought to term and delivered by a gestational carrier (legal documentation is required for this gestational surrogacy arrangement).
- e)  The petitioners and/or the child are currently receiving services from DHS Office of Safety and Permanency for Children (OSPC) or have received such services with the last 12 months prior to filing of the petition (verification required).

2. What is the relationship between the child(ren) and the petitioners? \_\_\_\_\_

3. How long have the petitioners had the child(ren) continuously in their care? \_\_\_\_\_

4. Please state the number of children currently in petitioner's care: \_\_\_\_\_

5. How long has each petitioner resided in the State of Oregon? \_\_\_\_\_

_____ Name	_____ <i>Length of time in Oregon</i>
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**Each household member over 18 must sign below:**

All the information in this request is accurate to the best of my knowledge. I consent to a check of the Department's Child Protective Services records and a criminal history check. Based on the above information, I request that the Department of Human Services waive the requirement for home study and placement report.

Printed Name	Signature	Date
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /