



Adoption File Face Sheet

To the adoption attorney or petitioner(s):

To efficiently process the adoption file, fill out the information below. Place the completed face sheet at the front of the adoption packet submitted to DHS.
Thank you.

Type of Adoption <i>(Check appropriate category):</i>	
<input type="checkbox"/> Agency (domestic or international) <input type="checkbox"/> Non-related (Independent) <input type="checkbox"/> Relative (1 st degree blood relationship) <input type="checkbox"/> Re-Adoption/(Foreign)	<input type="checkbox"/> Step-parent <input type="checkbox"/> Other (one petitioner retains parental rights) <input type="checkbox"/> Out of State Public Agency (ICPC) <input type="checkbox"/> DHS Adoption

Name of Child(ren):			
Child(ren)'s DOB:			
Petitioners:			
Child(ren)'s country of origin <i>(if applicable)</i>:			
Attorney:			
County of jurisdiction:			
Birth mother's name:			
	<input type="checkbox"/> Biological	<input type="checkbox"/> Adoptive (legal)	
Birth father's name:			
	<input type="checkbox"/> Biological	<input type="checkbox"/> Putative	<input type="checkbox"/> Adoptive (legal)
Court case number:			
Name of adoption agency involved <i>(if applicable)</i>:			
Comments:			