

ADOPTION DATA SHEET

DATE: _____

CHILD'S NAME: _____ DOB: _____ AGE: _____

CITY & STATE OF BIRTH: _____

LIVING W/PETITIONER: Y / N

PARTY PETITIONER: Y / N

ADOPTING PARENTS:

FATHER'S NAME: _____

DOB: _____ AGE: _____

ADDRESS: _____ PHONE: _____ CELL: _____

CITY: _____ STATE: _____ ZIP: _____

MOTHER'S NAME (MAIDEN): _____

DOB: _____ AGE: _____

ADDRESS: _____ PHONE: _____ CELL: _____

CITY: _____ STATE: _____ ZIP: _____

BIRTH PARENTS

BIRTH FATHER: _____

DOB: _____ AGE: _____ (at time of birth)

ADDRESS: _____ PHONE: _____ CELL: _____

CITY: _____ STATE: _____ ZIP: _____

BIRTH MOTHER (MAIDEN): _____

DOB: _____ AGE: _____ (at time of birth)

ADDRESS: _____ PHONE: _____ CELL: _____

CITY: _____ STATE: _____ ZIP: _____

Is Birth Father Party-Petitioner? Y / N

Is Birth Mother Party-Petitioner? Y / N

PROCESS:

BIRTH MOTHER

BIRTH FATHER

Non-Resident Affidavit?	YES	NO	YES	NO
No other process?	YES	NO	YES	NO
Personal Service?	YES	NO	YES	NO
Waiver?	YES	NO	YES	NO
Consent form?	YES	NO	YES	NO
Is address unknown?	YES	NO	YES	NO
No Property Affidavit	YES	NO	YES	NO
Do we have medical certificate?	YES	NO, if no, are we in the process of getting Y/N		
Do we have a copy of original birth certificate?	YES		NO	
How long has adopting couple been married?	_____	years	_____	months
How long has child lived with couple?	_____	years	_____	months