

PLEASE FILL OUT, PRINT AND BRING THE DAY OF YOUR CONSULTATION ALONG WITH \$100.00 CONSULTATION FEE.



DATE: _____

ADOPTION INFORMATION SHEET

Petitioners name: _____

Date of birth: _____ SSN: _____

Marital status: _____ Divorced _____ Single _____ Separated _____ Widowed _____ Married

Email Address: _____

Spouse's name: _____

Spouse's date of birth: _____ SSN: _____

Petitioner's address: _____

Petitioner's county of residence: _____

Petitioner's telephone number: _____

Child's name: _____

Child's date of birth: _____ Child's gender: _____ Male _____ Female

Who has Current custody of child: _____

How long has current custody been in place: _____

Siblings of child: (Please state where half or full blooded) _____

Mother of child and address: _____

Father of child and address: _____

Was the child born during marriage: _____ (if so, Was mother married to the alleged biological father: _____)

If not name of Mother's Husband at time of birth and address: _____

Has a DNA test been done: _____ Did father sign papers for the state: _____ (if so do they have a copy)

Has father legitimized: _____ Has father lived with child: _____

Are all parents alive? ____yes ____No ____Not Sure

Will the parent sign surrenders? ____Yes ____No ____Not Sure

Has father paid support for the child (before or after birth, please specify): _____

Is there a Child Support Order in place? _____ Are there Arrears? _____

Has father visited with the child: _____ Date of Last Visit: _____

Has the child ever been in guardianship or legal custody of anyone else: _____

Does child have any valuable property: (Trust fund, benefits for medical issues, or future interest in probate estate, please provide info, if so) _____

If there is an open Child Support case, please list the Case# _____ and total amount of Arrears _____ or when last payment was received _____.

New name upon adoption of child: _____

***Finger Print & Home Study requirements are determined by the court. Those fees are separate from the Attorney's Fees and are due at time of service.**

***Fees based on Bartow, Gordon and Polk Counties. All other counties require increased fees due to county requirements.**



Thank you for choosing our firm to serve your Adoption needs.

Your next appointment will be on: _____ at _____.

You will be signing the Legal Documents needed in your adoption. Please bring the following items with you on this day.

Please bring with you on Signing Day:

Child being Adopted birth certificate: _____

Marriage Certificate for Petitioner & Spouse: _____

Birth Certificate of Mother/Father: _____

Birth Certificate of Adopting Parent: _____

DNA test, if applicable: _____

Papers that show paternity: _____

Legitimation Order: _____

Child Support: If arrears are due, please list that amount \$ _____

Death certificate of Mother, Biological Father or Legal Father, if deceased: _____

Driver's License or state issued ID for all parties: _____ (will copy on signing day)

Divorce Decrees of any Petitioner or Spouse: _____