

ADOPTION CHECK SHEET

Need the following items

1. FILING FEE: \$160.00 made payable to the 17th Judicial Circuit Court (fees may increase and are subject to change depending on the court)
2. Child's birth certificate or hospital birth verification
3. Report card or school progress report for school age children
4. Marriage Certificate of adoption petitioners. Couples must be married for at least 10 months before filing.
5. Death Certificate if biological parent is deceased
6. Judgement of Divorce (if applicable)
7. Support Order (if applicable)
8. Acknowledgment of Paternity (if applicable)
9. Friend of the Court printout of support paid in the last two years (if applicable)
10. Three letters of reference to support adoption by stepparents (originals not copies)
Examples of who should write letters: not more than one relative, business associate or supervisor, friend, neighbor, pastor, child's teacher or counselor, day-care provider.
11. Physician's report for adoption (Child)
12. Physician's report for adoption (Adoption Petitioner)

Helpful to have but not mandatory

1. **Resume of adopting parent and custodial parent**
2. **Autobiography of adopting parent and custodial parent**- Give a brief summary of your life from infancy to the present time - including places lived, occupations, previous experiences with children, and any other experiences that you feel are related to this adoption

INTAKE

CASE INFORMATION

1. Has an action within the jurisdiction of the family division of circuit court involving the family or family members of the minor been previously filed? Name of Court:_____Case Number_____
2. Will the adoptee's name be changed? If so please provide First_____, Middle_____ Last_____.
3. Does the adoptee have a court-appointed guardian and/or conservator? If so name_____and address_____
4. The adoptee has been living with the Petitioners in their home for_____months before filing this petition.

CHILD INFORMATION

1. Adopted last name:_____
2. First name:_____
3. Middle name_____
4. Biological last name_____
5. Biological first name_____
6. Biological middle name_____
7. Sex_____
8. Birthplace (City, County, State)_____
9. Date of Birth:_____
10. Race_____
11. Child's legal status prior to adoption:_____
12. Last placement type prior to adoption_____

13. Previous Adoption: Yes/No

14. If yes, what county_____

15. If yes, what case #_____

16. Current address of the child:_____

17. Child's religion_____

18. Attendance at church:_____

19. Height_____Weight_____Hair_____Eyes_____

20. Name and address of child's regular physician:_____

21. Described child's overall health including any health problems_____

22. How long has the child lived with the step parent or other relative petitioning to adopt?_____

23. Contacts with extended family related to the parent whose rights will be terminated:

How often does the child visit parents, grandparents, cousins etc.:_____

24. How do the visits usually go?_____

25. Will child continue visiting after adoption? Explain:_____

26. List recreational activities/hobbies of the child_____

27. Describe child's relationship with brothers/sisters, friends, etc._____

28. Has the child been in trouble with police/school? If yes, explain _____

29. School - if the child is school age:

Name and address of school _____

Current Grade _____ Current Teacher _____

Overall grade average: _____ (need last copy of report card)

Describe child's school adjustment: _____

30. CHILD'S ATTITUDE ABOUT ADOPTION:

Does the child have knowledge of this adoption? _____

Does the child want to be adopted?
Describe _____

Additional Comments about child (information that may be important for the social worker of judge to know). _____

ADOPTIVE PARENT INFORMATION

ADOPTING FATHER

1. Father's last name: _____
2. Father's first name: _____
3. Father's middle name: _____
4. Father's date of birth _____
5. Father's place of birth _____
5. Father's social security number _____
6. Father's race _____
7. Hair _____ eyes _____ Height _____
Weight _____
8. Driver's license number _____
9. Telephone number home _____
10. Telephone number work _____
11. Education - schools attended, locations, highest grade completed,
dates: _____

12. Present marriage: Date _____, Place _____
13. Previous marriages: Dated _____, Place _____
14. Occupation - brief history of past/present employment - including
dates _____

15. Directions to
Home: _____

16. Income (give your total annual income do not include spouses income)

Your income _____ Source _____

17. Health - brief health history in your own words _____

18. List all the people living in your home, including children (list relationship and dates of birth) _____

19. Religion _____ Attendance _____

20. Hobbies and Recreational Activities: _____

21. Marital relationship (if applicable) What do you consider important in your marriage? _____

22. Motive for Adoption _____

23. Autobiography - Give a brief summary of your life form infancy to the present time - including places lived, occupations, previous experiences with children, and any other experiences that you feel are related to this adoption. _____

24. Relatives of adoptive parent

SEE SHEET

LICENSING RECORD CLEARANCE REQUEST - STEP PARENT

1. Aka_____
2. Michigan Driver's licenses number_____
3. Time lived in Michigan_____
4. Time lived in County_____
5. Height_____Weight_____
6. Have you ever been convicted of a crime, felony or misdemeanor? If yes explain_____

7. Type, location and date of conviction(s)_____

ADOPTING MOTHER

1. Mother's last name_____
2. Mother's first name_____
3. Mother's middle name_____
4. Mother's date of birth_____
5. Mother's social security number_____
6. Mother's race_____
7. Address (number, street, city, state, zip and county)_____
8. Marriage date:_____
9. Telephone number:_____
10. Relationship to adoptee_____

11. Hair _____ eyes _____ Height _____
Weight _____

12.. Driver's license number _____

13. Telephone number home _____

14. Telephone number work _____

15. Education - schools attended, locations, highest grade completed,
dates: _____

16. Present marriage: Date _____, Place _____

17. Previous marriages: Dated _____, Place _____

18. Occupation - brief history of past/present employment - including
dates _____

19. Directions to
Home: _____

20. Income (give your total annual income do not include spouses income)

Your income _____ Source _____

21. Health - brief health history in your own
words _____

22. List all the people living in your home, including children (list relationship and dates of
birth) _____

23.
Religion _____ Attendance _____

24. Hobbies and Recreational

Activities: _____

25. Marital relationship (if applicable) What do you consider important in your marriage? _____

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26. Motive for

Adoption _____

27. Autobiography - Give a brief summary of your life form infancy to the present time - including places lived, occupations, previous experiences with children, and any other experiences that you feel are related to this adoption. _____

28. Relatives of adoptive parent

SEE SHEET

LICENSING RECORD CLEARANCE REQUEST - STEP PARENT

1. Aka _____

2. Michigan Driver's licenses number _____

3. Time lived in Michigan _____

4. Time lived in County _____

5. Height _____ Weight _____

6. Have you ever been convicted of a crime, felony or misdemeanor? If yes explain _____

7. Type, location and date of conviction(s) _____

BIRTH PARENT INFORMATION - CUSTODIAL BIOLOGICAL PARENT

1. Mother's last name _____
2. Mother's first name _____
3. Mother's middle name _____
4. Mother's name before married: _____
5. Mother's date of birth _____ Place of birth _____
6. Mother's social security number _____
7. Mother's race _____
8. Hair _____ Eyes _____ Height _____
Weight _____
9. Driver's license number: _____
10. Telephone number Home _____ Work _____
11. Education - schools attended, locations, highest grade completed
dates _____

12. Present marriage: Date _____, Place _____
13. Previous marriages: Dated _____, Place _____
14. Occupation - brief history of past/present employment - including
dates _____

15. Income (give your total annual income do not include spouses income)
Your income _____ Source _____
16. Health - brief health history in your own

words _____

17. Religion _____ Attendance _____

18. Hobbies and Recreational Activities: _____

19. Marital relationship (if applicable) What do you consider important in your marriage? _____

20. Motive for Adoption _____

21. Autobiography - Give a brief summary of your life form infancy to the present time - including places lived, occupations, previous experiences with children, and any other experiences that you feel are related to this adoption. _____

22. Relatives of adoptive parent

SEE SHEET

NON-CUSTODIAL (BIOLOGICAL) PARENT

1. Father's last name: _____
2. Father's first name: _____
3. Father's middle name: _____
4. Street address _____
5. City, State, Zip _____
6. Social Security Number _____
7. Telephone number Home: _____ Work _____ -
8. Father's date of birth _____
9. Place of birth _____
10. Race _____
11. Hair _____ Eyes _____ Height _____
- Weight _____
12. Driver's license number: _____
13. Education - schools attended, locations, highest grade completed
dates _____

14. Present marriage: Date _____, Place _____
15. Previous marriages: Dated _____, Place _____
16. Occupation - brief history of past/present employment - including
dates _____

17. Other people in the home including children and relationship of
each _____

18. Health - brief health history in your own words_____

19. Other information: (Any information about your life so far that you feel should be in the court file for your child's information.)

20. Relatives of adoptive parent

SEE SHEET