

ADOPTION QUESTIONNAIRE
CALHOUN COUNTY 37th CIRCUIT COURT

Name of child:

Name AFTER adoption:

First Middle Last First Middle Last

____ Female ____ Male Date of Birth: _____

BIRTH MOTHER INFORMATION:

First Middle Last Date of Birth

Present address: _____

Contact Information: Home#: _____ Cell#: _____ Work#: _____

Email address: _____

Employer's Name/Address: _____

Occupation: _____

LEGAL FATHER INFORMATION:

First Middle Last Date of Birth

Present address: _____

Contact Information: Home#: _____ Cell#: _____ Work#: _____

Email address: _____

Employer's Name/Address: _____

Occupation: _____

NAME OF PERSON THAT HAS CUSTODY OF THE ADOPTEE---IF DIFFERENT THAN BIRTH PARENT:

_____ Female ___ Male
First Middle Last Date of Birth

Present address: _____

Contact Information: Home#: _____ Cell#: _____ Work#: _____

Email address: _____

Employer's Name/Address: _____

Occupation: _____

PROPOSED ADOPTIVE PARENT(S) INFORMATION:

#1

_____ Female ___ Male
First Middle Last Date of Birth

Present address: _____

Contact Information: Home#: _____ Cell#: _____ Work#: _____

Email address: _____

Employer's Name/Address: _____

Occupation: _____

#2:

_____ Female ___ Male
First Middle Last Date of Birth

Present address: _____

Contact Information: Home#: _____ Cell#: _____ Work#: _____

Email address: _____

Employer's Name/Address: _____

Occupation: _____

FURTHER INFORMATION:

Date adoptive parent(s) and child(ren) began living together: _____

Brief reason for adoption:

Have the birth parents or proposed adoptive parent(s) had any contact with Children's Protective Services?

_____ Yes _____ No If yes, Date: _____

Have proposed adoptive parents ever been convicted in a criminal proceeding, imprisoned, or placed on probation or parole?

_____ Yes _____ No If yes, give details including date, place, nature of offense/disposition:

REFERENCES: Your letters **MUST be attached to this questionnaire.**

Please list individuals (not relatives) who have known you well enough **to write a letter** to the court on your behalf.

1. Name: _____ Phone Number: _____

Present address: _____

2. Name: _____ Phone Number: _____

Present address: _____

I HAVE EXAMINED THIS ADOPTION QUESTIONNAIRE AND THE CONTENTS ARE TRUE. THIS FORM AND LETTERS MUST BE SUBMITTED TO THE COURT WITH THE PETITION FOR ADOPTION.

Date

Signature of proposed adoptive parent

Date

Signature of proposed adoptive parent

Date

Signature of Adoptee, if over the age of 14