

**IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PA
ORPHANS' COURT DIVISION**

IN RE: Adoption of _____ : O.A. No. _____ of _____
: :
: :
_____ : Filing Fee _____
(ADOPTEE'S name as on birth cert.) : Attorney _____

PETITION FOR ADOPTION
(23 Pa. C.S.A. § 2701)

TO THE HONORABLE, THE JUDGE OF SAID COURT:

The petition of _____
[Name(s) of Adopting Parent(s)]

respectfully represent(s):

GENERAL INFORMATION:

1. Pre-adoption name of ADOPTEE:

2. Name requested for ADOPTEE after adoption:

3. Age, date of birth, place of birth and sex of ADOPTEE:

4. State any blood or present legal relationship between ADOPTEE and Petitioner(s):

5. Name, address and phone number of attorney representing Petitioner(s):

6. Name, address and phone number of attorney or guardian ad litem who is representing or has represented ADOPTEE:

7. If Report of Intention to Adopt is required, state date of filing:

8. If ADOPTEE's natural parent(s) is/are deceased, list name(s), date(s) of death, and attach original or certified copies of the death certificate(s):

9. If the parental rights of ADOPTEE's natural parent(s) were terminated, state name(s), date(s), place(s) and manner of terminating the parental rights:

10. Name and address of Intermediary, if any:

Filing date of Report of Intermediary: _____

11. If physical care or custody of ADOPTEE was placed with adoptive parent(s) by Intermediary, answer the following: *(23 Pa. C.S.A. § 2530)*

a) Date of placement: _____

b) Place of placement: _____

c) Circumstance of placement: _____

d) Was a favorable home study completed by a local public child care agency, an adoption agency, or a Court designated licensed social worker prior to said placement? _____

e) Did Intermediary make an interim placement pursuant to 23 Pa.C.S.A. Section 2530(c) _____

If yes, answer the following:

Was the Court immediately notified of the interim placement and the identity of the individual or agency conducting the home study?

If no, explain why: _____

f) If home study and preplacement report were completed, have they been filed?

(1) If yes, list filing date: _____

(2) If no, explain: _____

(All home study and preplacement reports shall be filed at least five days before the adoption hearing to give the Court an opportunity to review them.)

12. **Has an investigation been conducted pursuant to 23 Pa.C.S.A. Section 2535**

a) **If yes, state report's filing date:**

b) **If yes, does the investigative report contain a Pennsylvania State Police and child abuse clearance as required by 23 Pa.C.S.A. Sections 6344(b)(2) and (d)**

c) **If no, explain why:** _____

(All investigation reports shall be filed at least five days before the adoption hearing to give the Court an opportunity to review them.)

13. **ADOPTEE:**

a) **Pre-adoption name:** (As it appears on birth certificate)

b) **Post-adoption name:**

c) **Age and date of birth:** _____

d) **Place of birth:** _____

e) **Date and place of initial placement with adopting parent(s):**

f) **Length of residence with adopting parent(s):**

g) **Religious affiliation of ADOPTEE:**
(1) **Pre-adoption:** _____
(2) **Post-adoption:** _____

h) **Racial background of ADOPTEE:** _____

i) **Is this ADOPTEE an “Indian Child” pursuant to the Indian Child Welfare Act, 25 U.S.C. §1901 et.seq.?** _____ Yes _____ No

j) **If ADOPTEE is over 12 years of age, is ADOPTEE's written consent attached?**

k) **Has ADOPTEE's birth certificate or certification of registration of birth been made a part of the record in these proceedings?** _____

[See 23 Pa. C.S.A. § 2701(9) and § 2702]

(1) If no, it must be attached to this petition or admitted as an Exhibit at the adoption hearing.

(2) If no birth certificate or certification of registration of birth can be obtained, a statement of the reasons therefor and an allegation of the effort made to obtain the certificate must be presented to the Court with a request that the Court establish a date and place of birth at the adoption hearing on the basis of the evidence presented.

[See 23 Pa. C.S.A. § 2701(A)(9)]

(A) To expedite the adoption hearing and give the Court an opportunity for review, this request and relevant information shall be made a part of the record in the form of a written Petition. This written petition shall be filed and a certified copy presented to the Court at least ten days before the adoption hearing. The request and factual averments shall also be presented as evidence at the adoption hearing.

l) List assets possessed or owned by ADOPTEE and the value of these assets:

m) **Marital status of ADOPTEE:** _____

If married, state date of marriage and spouse's name, age and address:

14. **ADOPTING MOTHER:**

(A consenting natural mother in a step-father adoption is not considered an adopting mother. If this adoption involves a consenting natural mother in a step-father adoption, do not complete this part of the petition.)

a) **Present name:** _____

b) **Maiden name:** _____

c) **Age and date of birth:** _____

d) **Birthplace:** _____

e) **Marital status:** _____

f) Name of present spouse: _____

g) Date and place of most recent marriage: _____

h) Name(s) and age(s) of person(s) who presently live in your household:

i) Present address:

j) How long have you lived at this present address?

k) List residences during the past five years:

l) Are you related to ADOPTEE? _____

If yes, state relationship: _____

m) Have you ever been convicted of a misdemeanor or a felony?

If yes, list crime, date and place of conviction:

n) Do you have any communicable or contagious disease?

If yes, state what it is: _____

o) State employment and approximate annual income:

p) Religious affiliation: _____

q) Racial background: _____

15. **ADOPTING FATHER:**

(A consenting natural father in a step-mother adoption is not considered an adopting father. If this adoption involves a consenting natural father in a step-mother adoption, do not complete this part of the Petition.)

a) Present name: _____

b) Age and date of birth: _____

c) Birthplace: _____

d) Marital status: _____

e) Name of present spouse: _____

f) Date and place of most recent marriage: _____

g) Name(s) and age(s) of person(s) who presently live in your household:

h) Present address:

i) How long have you lived at this present address?

j) List residences during the past five years:

k) Are you related to ADOPTEE? _____

If yes, state relationship: _____

l) Have you ever been convicted of a misdemeanor or a felony?

If yes, list crime, date and place of conviction:

m) Do you have any communicable or contagious disease?

If yes, state what it is: _____

n) **State employment and approximate annual income:**

o) **Religious affiliation:** _____

p) **Racial background:** _____

16. **If there is no Intermediary or if no Report of Intermediary has been filed or if ADOPTEE is over the age of 18 years, complete the following:**

[See 23 Pa. C.S.A. § 2701(5)]

a) **NATURAL MOTHER OF ADOPTEE:**

(1) **Name:** _____

(2) **Address:** _____

(3) **Age and date of birth:** _____

(4) **Birthplace:** _____

(5) **Marital status as of the time of birth of ADOPTEE:**

(6) **Marital status during one year prior to the time of birth of ADOPTEE:**

(7) **Maiden name:** _____

(8) **Racial background:** _____

(9) **Religious affiliation:** _____

b) NATURAL FATHER OF ADOPTEE:

(1) **Name:** _____

(2) **Address:** _____

(3) **Age and date of birth:** _____

(4) Birthplace: _____

(5) Marital status as of the time of birth of ADOPTEE:

(6) Marital status during one year prior to the time of birth of ADOPTEE:

(7) Racial background: _____

(8) Religious affiliation: _____

17. State whether all consents required by *23 Pa.C.S.A. Section 2711* (relating to consents necessary to adoptions) are a part of this Petition. If all required consents are not a part of this Petition, state basis upon which the consents are not required.

[See 23 Pa. C.S.A. § 2533(b)(7)]

18. Are Petitioner(s) aware of any violation of any statute regulating the interstate placement of children with respect to the placement of the ADOPTEE.

[See 23 Pa.C.S.A. § 2533(b)(10)].

19. Have adopting parent(s) received medical history information about ADOPTEE?

a) If not obtained, state the reason. [See 23 Pa.C.S.A. § 2533(b)(12)]

b) Is/are adopting parent(s) aware of and satisfied with ADOPTEE's mental and physical health?

20. Petitioner(s) has/have reviewed the Disclosure of Fees and Cost form required by Pennsylvania Supreme Court Orphans' Court Rule 15.5(d) and avers that it accurately represents all of the fees, costs and expenses paid or to be paid by Petitioner(s) relative to this adoption. _____

WHEREFORE, your Petitioner(s) pray for a Decree of adoption which creates the relationship of parent(s) and child between the Petitioner(s) and the ADOPTEE.

[Signature(s) of Petitioner(s)]

ATTORNEY FOR PETITIONER(S):

(Signature)

(Type or print name)

(Address)

(Telephone Number)

COMMONWEALTH OF PENNSYLVANIA)
) ss:
COUNTY OF BUTLER)

The above named Petitioner(s), being duly sworn according to law, depose(s) and say(s) that the facts set forth in the above Adoption Petition for Adoption are true and correct to the best of his/her/their knowledge, information and belief.

[Signature(s) of Petitioner(s)]

SWORN to and subscribed
before me this _____ of
_____, 20 _____

Signature of Notary
(SEAL OF NOTARY)

My Commission Expires

(Alternative Method for Verification)

I/We, the above named Petitioner(s) do verify that the statements contained in this Petition for Adoption are true and correct to the best of my/our knowledge, information and belief. I/We understand that false statements herein made are subject to the penalties of 18 Pa.C.S.A. Section 4904 relating to unsworn falsification to authorities. (The maximum penalty for such violation is a period of incarceration up to two (2) years and a \$5,000 fine.)

Date: _____

[Signature(s) of Petitioner(s)]

WITNESS:

ADDRESS OF WITNESS:

CONSENT OF ADOPTEE

I am over twelve years of age, have read the foregoing Petition and consent to my adoption by _____
_____. I also agree to
having my name changed to _____

Date: _____

(Signature of Adoptee)

WITNESS:

ADDRESS OF WITNESS:

CONSENT OF NATURAL PARENT

As natural parent (or parent by former adoption), I consent to his/her adoption by my spouse. I believe it is in the best interest of my child. I further agree to the name change as heretofore stated.

Date: _____

(Signature of Natural or Legal Parent)

WITNESS:

ADDRESS OF WITNESS:

CERTIFICATION OF FEES

(Must be attached to Adoption Petition)

I hereby certify that the amount of fees and expenses paid/to be paid to counsel in connection with this adoption is as follows:

The amount of fees, costs, and expenses paid or to be paid to an Intermediary or any other person or institution in connection with this adoption are as follows:

(Petitioner[s]’ Attorney)

(Address)

(Phone)

DATE:

