

# **MADERA COUNTY SUPERIOR COURT STATE OF CALIFORNIA**

## **INDEPENDENT ADOPTION PACKET**

Read the enclosed instructions carefully before filling out your forms. The attached forms should be typed or completed in blue or black ink, neatly and clearly.

**Material prepared and/or distributed by the Superior Court Clerk's Office is intended for informational and educational purposes ONLY. Such material is NOT intended to be and IT IS NOT LEGAL ADVICE as to your specific case. It is not intended to take the place of competent legal advice from an attorney. You are strongly advised to seek the advice of a licensed attorney before starting or completing your case in order to protect valuable legal rights that you may have and of which you may be unaware of. Please contact a competent attorney of your choice. The Clerk's Office cannot give legal advice.**

## General Information on Adoptions

### Before you begin

**Seek legal advice about your family's options before beginning any adoption.** Every family is different and adoption may not be necessary for some families. Visit the Self-Help Guide to the California Courts adoption page to get copies of adoption forms, look for organizations that provide legal help with adoptions, and learn how to complete the adoption process on your own if you do not have a lawyer: [selfhelp.courts.ca.gov/adoptions](http://selfhelp.courts.ca.gov/adoptions). You can also get copies of adoption forms at your local court clerk's office.

**What type of adoption will you be filing?** In California there are several kinds of adoptions. This information sheet provides steps for the following types:

- Stepparent and domestic partnership
- Stepparent and domestic partnership confirmation of parentage
- Independent
- Agency (within the United States) and includes:
  - Agency placement or agency joinder
- Intercountry

For more information and definitions on these types of adoptions, see [selfhelp.courts.ca.gov/adoptions](http://selfhelp.courts.ca.gov/adoptions).

### What department or agency will be handling your home study or investigation?

In most adoptions, a home study or an investigation will be necessary.

- For independent adoptions
  - A regional office of the Department of Social Services (DSS).
  - An adoption agency.
- For an independent adoption of a newborn, you must also choose an adoption service provider (ASP).

The ASP is an individual or an adoption agency licensed and certified by the State of California. Their role is to explain to the birth parent their rights in the adoption process (before “placing” the child with you) and to witness the signing of documents and consent.

There is a listing of all providers who have been licensed as an ASP on the California Department of Social Services website. You can see the list by agency or the list by individual. The ASP will charge a fee. You must pay the fee as the adoptive parent.

- For more information on a home study or ASP, see [selfhelp.courts.ca.gov/independent-adoption/placed](http://selfhelp.courts.ca.gov/independent-adoption/placed).
- For stepparent adoptions, the court investigator or a privately hired, licensed clinical social worker or other appropriate licensed individual will be handling your home study or investigation. See [selfhelp.courts.ca.gov/stepparent-adoption](http://selfhelp.courts.ca.gov/stepparent-adoption).

If you need more information about what office or agency can conduct your home study, you can visit the California Department of Social Services website. Find out what paperwork they will need from you and when it must be sent to them once you file your *Adoption Request*.

### Documents needed in addition to the *Adoption Request*

For most adoptions, the adopting parent, their legal representative, or the agency will be required to obtain additional signed forms or certified documents. These documents can include:

- Consent or relinquishment for adoption
- Death certificate (if applies)
- Other court orders
- Waiver of notice or denial of parentage



In certain situations additional court proceedings may be necessary. These may include:

- Petition freeing the child from parental custody and control and an order. (Note: This is a separate court action.)
- Petition to terminate parental rights of an alleged parent and an order. (Note: In some courts, this can be filed within the adoption case but in other courts it is a separate court action.)

Each of the above are specific procedures which must be followed based on the determination of the status of the parent. If this is an agency adoption, the agency will obtain the above information for the court.

This paperwork is needed to complete your adoption home-study or investigation.

The status of a parent is based on the relationship of that parent to the child and other factors. For definitions and more information about status of parent and what additional involvement or paperwork is needed, go to [selfhelp.courts.ca.gov/adoptions](http://selfhelp.courts.ca.gov/adoptions).

## Stepparent/Domestic Partner Adoptions

If you wish to adopt the child of your spouse or domestic partner, you may be eligible for a stepparent adoption. There are two types of stepparent adoptions. Answer these questions to figure out which process is right for you:

- Were you in a union with the child's legal parent **at the time the child was born** and are you **still in a union** with the legal parent? (A "union" means a marriage, a California registered domestic partnership, or a registered domestic partnership or civil union from another state that is legally equivalent to a marriage.)
- Did your **spouse or domestic partner give birth to the child** or was the child born through a **gestational surrogacy process** brought about by one or both of you?

If you answered no to **either** question, complete the items below for a **stepparent/domestic partner adoption**.

If you answered yes to **both** questions, complete the items below for a **stepparent adoption to confirm parentage**.

### 1 Fill out court forms

- |               |   |  |
|---------------|---|--|
| • ADOPT-203   | <i>Stepparent Adoption Request</i>            | This tells the judge about you and the child you are adopting.   |
| • ADOPT-210   | <i>Adoption Agreement</i>                     | This tells the judge that you and the child, if 12 or older, agree to the adoption. Fill it out, but do not sign it until the judge asks you to sign it. |
| • ADOPT-215   | <i>Adoption Order</i>                         | The judge signs this form if your adoption is approved.  |
| • ICWA-010(A) | <i>Indian Child Inquiry Attachment</i>        | This lets the judge know that you have asked whether the child may be an Indian child.   |
| • ICWA-020    | <i>Parental Notification of Indian Status</i> | One form is required for each birth parent. This shows that the child's parents have been asked about potential Indian status.                           |

#### Additional Forms for Stepparent Adoption to Confirm Parentage

- |  |   |  |
|--|---|--|
| • ADOPT-205 (or an equivalent declaration) | <i>Declaration Confirming Parentage in Stepparent Adoption</i>                        | This tells the court how you conceived your child and whether there are any other parents. Only use this if you are seeking a stepparent adoption to confirm parentage. See above for more information on this type of adoption. Both the birth parent and the adopting parent must complete a separate declaration.<br>-OR-   |
| • ADOPT-206 (or an equivalent declaration) | <i>Declaration Confirming Parentage in Stepparent Adoption: Gestational Surrogacy</i> | This tells the court how you conceived your child and whether there are any other parents. Only use this if you are seeking a stepparent adoption to confirm parentage because the child was conceived through a gestational surrogate and was born outside of California, and the state where the child was born only allowed one intended parent to be named as a legal parent on the child's birth certificate. |



## 2 Take your forms to court

Take the completed forms to the court clerk in the county where you live. The court will charge a \$20 filing fee (set by Health and Safety Code section 103730). Or take the forms to your lawyer or adoption agency, if you are using one. If there is no hearing, form ADOPT-210 must be signed in front of the court clerk or a notary.

**Note:** In a stepparent adoption to confirm parentage, no investigation or hearing is required unless ordered by the court for good cause. Sign form ADOPT-210 in front of a notary or the court clerk when you file the forms and a judge will review your request. If the paperwork is complete and you meet the requirements, the judge will sign the *Adoption Order* (form ADOPT-215) and the adoption is complete. You and your attorney will receive copies. If the judge orders an investigation and hearing, go to the next steps.

## 3 An investigation is completed

In most stepparent adoptions an investigation or a report must be completed before the final hearing. This will be completed by either someone you identified in the request or who was ordered by the court. To begin the investigation you will be required to send the *Adoption Request* and supporting documentation to the investigator. A home visit may also be required.

## 4 Go to court on the date of your hearing

Bring:

- The child you are adopting;
- Form ADOPT-210;
- Form ADOPT-215;
- A camera, if you want a photo of you and your child with the judge (*optional*); and
- Friends/relatives (*optional*).
- California Department of Social Services form VS-44 may be needed, see [selfhelp.courts.ca.gov/stepparent-adoption/prepare-lodge-forms](http://selfhelp.courts.ca.gov/stepparent-adoption/prepare-lodge-forms).

## Independent or Agency Adoptions in the United States

If this is an independent or agency adoption in the United States, complete items 1 through 4 below.

Note: The rights of the existing parents usually terminate with adoptions. In an independent adoption, if the existing and adopting parents agree, the rights of the existing parents do not have to be terminated. See Family Code section 8617(b).

## 1 Fill out court forms

- |                |   |  |
|----------------|---|--|
| • ADOPT-200    | <i>Adoption Request</i>                       | This tells the judge about you and the child you are adopting.   |
| • ADOPT-210    | <i>Adoption Agreement</i>                     | This tells the judge that you and the child, if 12 or older, agree to the adoption. Fill it out, but do not sign it until the judge asks you to sign it. |
| • ADOPT-215    | <i>Adoption Order</i>                         | The judge signs this form if your adoption is approved.  |
| • ADOPT-230    | <i>Adoption Expenses</i>                      | This lets the judge know what payments were made that relate to the child you are adopting.  |
| • ICWA-010(A)* | <i>Indian Child Inquiry Attachment</i>        | This lets the judge know that the required questions have been asked to determine whether the child may be an Indian child.                              |
| • ICWA-020*    | <i>Parental Notification of Indian Status</i> | One form is required for each birth parent. This shows that the child's parents have been asked about potential Indian status.                           |

\*The agency or adoption service provider is responsible for getting these forms completed and making them part of the adoption file for adoptions under the Welfare and Institutions Code; other evidence, including court orders regarding ICWA may be necessary.



**2 Take your forms to court**

Take the completed forms to the court clerk in the county where you live. The court will charge a \$20.00 filing fee (set by Health and Safety Code section 103730). Or take the forms to your lawyer or adoption agency, if you are using one.

**3 The social worker writes a report**

In most adoptions, a social worker writes a report. This report gives important information to the judge about the adopting parents and the child. The social worker will ask you questions. You may have to fill out forms. You may be required to pay a fee for this report. The social worker will file the report with the court and send you and your attorney a copy. When you get the report, ask the clerk for a date for your adoption hearing.

**4 Go to court on the date of your hearing**

Bring:

- The child you are adopting;
- Form ADOPT-210;
- Form ADOPT-215;
- Form ADOPT-230;
- A camera, if you want a photo of you and your child with the judge (*optional*); and
- Friends/relatives (*optional*).

## Intercountry Adoptions

If this is an intercountry (international) adoption, complete items 1 through 6 below.

Note: You must follow this process to adopt your child under California law, even if the adoption was previously finalized in a foreign country. If the child's adoption was finalized in a foreign country, you must file the *Adoption Request* within the earlier of 60 days of the child's entry to the United States, or the child's 16th birthday.

**1 Fill out court forms**

- |               |   |  |
|---------------|---|--|
| • ADOPT-200   | <i>Adoption Request</i>                       | This tells the judge about you and the child you are adopting.   |
| • ADOPT-210   | <i>Adoption Agreement</i>                     | This tells the judge that you and the child, if 12 or older, agree to the adoption. Fill it out, but do not sign it until the judge asks you to sign it. The judge signs this form if your adoption is approved. |
| • ADOPT-215   | <i>Adoption Order</i>                         |  |
| • ADOPT-230   | <i>Adoption Expenses</i>                      | This lets the judge know what payments were made that relate to the child you are adopting.  |
| • ICWA-010(A) | <i>Indian Child Inquiry Attachment</i>        | This lets the judge know that you have asked whether the child may be an Indian child.   |
| • ICWA-020    | <i>Parental Notification of Indian Status</i> | One form is required for each birth parent. This shows that the child's parents have been asked about potential Indian status.   |

**2 Postadoption or postplacement visits and reports**

If the child's adoption was finalized in a foreign country, there will be at least one postadoption visit provided by the international adoption agency. The report of this visit must be submitted to the court as described below. If the child was born in a foreign country and placed with a California family for adoption in this state, the adoption agency must provide postplacement supervision with up to four visits. These reports are also provided to the court.

**3 Attach documentation**

If the child's adoption was finalized in a foreign country, you must attach the following documents to your *Adoption Request*:

- A certified or otherwise official copy of the foreign decree, order, or certification of adoption that reflects finalization of the adoption in the foreign country;
- A certified or otherwise official copy of the child's foreign birth certificate;
- A certified translation of all required documents that are not written in English;
- Proof that the child was granted lawful entry into the United States as an immediate relative of the adoptive parent or parents;
- A report from at least one postplacement home visit by an intercountry adoption agency or a contractor of that agency licensed to provide intercountry adoption services in the state of California; and
- A copy of the home study report previously completed for the international finalized adoption by an adoption agency authorized to provide intercountry adoption services, in accordance with Family Code section 8900.

**4 Take your forms to court**

Take the completed forms and any required documents to the court clerk in the county where you live. The court will charge a \$20.00 filing fee (set by Health and Safety Code section 103730). Or take the forms to your lawyer or adoption agency, if you are using one.

**5 Provide a copy of the forms and documents**

If the child's adoption was finalized in a foreign country, provide a copy of the forms and documentation you filed with the court to any adoption agency that provided services to you for your international adoption.

**6 Go to court on the date of your hearing**

Bring:

- The child you are adopting;
- Form ADOPT-210;
- Form ADOPT-215;
- Form ADOPT-230;
- A camera, if you want a photo of you and your child with the judge (*optional*); and
- Friends/relatives (*optional*).

**Inquiry and Notice Under the Indian Child Welfare Act (ICWA)**

- The child and other people in the child's life (parents and extended family members, see definition below) must be asked specific questions in order to determine whether the child may be an Indian child. The *Indian Child Inquiry Attachment* (form [ICWA-010\(A\)](#)) should be attached to the *Adoption Request*. In agency adoptions, it is the responsibility of the agency to ensure that this inquiry is conducted and that the form is made part of the adoption file. In independent adoptions, the adoption service provider, CDSS Regional Office, or delegated county adoption agency is responsible. For more information about the duty of inquiry, see form [ICWA-005-INFO](#).
- Extended family member is defined by law or custom of the Indian child's tribe or, if no law or custom, must be a person who is 18 years or older and who is the Indian child's grandparent, aunt or uncle, brother or sister, brother-in-law or sister-in-law, niece or nephew, first or second cousin, or stepparent. (25 U.S.C. § 1903(2)(2).)
- A completed version of *Parental Notification of Indian Status* (form [ICWA-020](#)) for each birth parent should be attached to the *Adoption Request*, OR it should be shown that a good faith attempt was made to provide the form to each birth parent, the Indian custodian, or guardian of the child and inform them that they are required to complete and submit the form to the court. In agency adoptions, it is the responsibility of the agency to ensure that this form is provided to the birth parents and made part of the adoption file. In independent adoptions, the adoption service provider, CDSS Regional Office, or delegated county adoption agency is responsible.

- If there is **reason to believe** that the child is or may be an Indian child, additional inquiry is required. For more information about the duty of inquiry, see form [ICWA-005-INFO](#).
- If, at any time during the proceeding, there is **reason to know** that the child is an Indian child, notice must be provided of the adoption request to the child's tribe or tribes, parents, Indian custodian, and the Bureau of Indian Affairs, using *Notice of Child Custody Proceeding for Indian Child* (form [ICWA-030](#)). This form must be served by registered or certified mail, with return receipt requested.
  - Reason to know a child is an Indian child means that (1) a person having an interest in the child, including the child, informs the court the child is an Indian child; or (2) the child, the child's parents, or Indian custodian lives on a reservation or in an Alaska Native village; or (3) any person, tribe, or organization informs the court that it has discovered information indicating that the child is an Indian child. The court must proceed per rule 5.481(b)(3) of the California Rules of Court.
- If it is determined that the child **is an Indian child** or this is a tribal customary adoption, see Adoption of an Indian Child, below.

## **Adoption of an Indian Child**

If you are adopting an Indian child, fill out and bring to court the following additional forms:

- Adoption of Indian Child* (form ADOPT-220); and
- Parent of Indian Child Agrees to End Parental Rights* (form ADOPT-225).

If this is a tribal customary adoption, a copy of the tribal customary adoption order must be attached to the petition (form ADOPT-200) and the order (form ADOPT-215).

Note: An Indian child who has reached the age of 18 and who was placed for adoption, may apply to the court which entered the final order or decree. That court shall inform that child of their tribal affiliation, if any, of the child's biological parents and provide such other information as may be necessary to protect any rights flowing from the child's tribal relationship. [25 U.S.C. § 1917]

## **"Open" Adoption and Use of Contact After Adoption Agreement (Family Code Section 8616.5)**

If you want your child to have contact with their birth relatives after the adoption, you can use *Contact After Adoption Agreement* (form ADOPT-310). This form describes the kind of contact the birth relatives will have with your child after the adoption is finalized. If you use this form, fill it out and file this form with the court before the finalization hearing or order of the court. A file-marked copy of this agreement must be provided within 30 days of filing to all adult parties to this agreement and any licensed agency that placed the child or consented to the adoption, and the child, if age 12 or older.

Important: This is a voluntary agreement and is not required for the finalization of the adoption. If you chose to use this form, it will become part of the adoption file and will be enforceable by the court.

The adoptive parent or parents, the child, and the child's birth relatives can agree to continuing contact without using this form, but unless that agreement is in writing and attached to the *Contact After Adoption Agreement* (form ADOPT-310) it may not be enforced by the court if it is not followed.

Birth relatives are birth parents, siblings, and other birth relatives. For Indian children, this can also include the child's Indian tribe.

# INDEPENDENT ADOPTION PROGRAM (IAP)

## FACT SHEET

- The California Department of Social Services (CDSS) or delegated county adoption agency is required to investigate all Independent Adoption Petitions and submit a final report to the court with its findings within 180 days of receipt of 50 percent of the fee, or longer as determined by the court, as long as full payment has been received. (effective 10/1/2008)
- The fee for the cost of the investigation of an Independent Adoption petition is \$4,500. (effective 10/1/2008)
- The fee for the cost of the investigation of an Independent Adoption petition for a family with a completed, valid pre-placement evaluation is \$1,550. The pre-placement evaluation must be less than one year old and meet the requirements of Family Code Section 8811.5. (effective 10/1/2008)
- The fee for the cost of the investigation of an Independent Adoption petition for a family with a completed, valid private agency adoption home study is \$1,550. The agency adoption home study must be less than two years old at the time of filing a petition. (effective 1/1/2013)
- Once the petition is filed with the court, a copy and 50 percent of the fee shall be mailed to CDSS or the delegated county adoption agency. (effective 10/1/2008)
  - The 180 day time-frame will begin once the Department or delegated adoption agency has received a copy of the filed petition and 50 percent of the fee.
- The remaining 50 percent of the fee shall be paid no later than the date determined by CDSS or the delegated county adoption agency. The CDSS or delegated county adoption agency cannot file the final court report until the remainder of the fee is paid. (effective 10/1/2008)
- The fee for all Independent Adoption investigations is non-refundable.
- Request for fee waivers will no longer be accepted. (effective 10/1/2008)
- The fee may be reduced in some cases, where the prospective adoptive parent(s) is in the lower income category, according to the income limits published by the Department of Housing and Community Development (<http://www.hcd.ca.gov/hpd/hrc/rep/state/incNote.html>), and making the required payment would be detrimental to the welfare of an adopted child. However, in no case will the fee be reduced to less than \$500. (effective 1/1/2014)
- Adopting families may be eligible for a tax credit for qualifying expenses paid to adopt an eligible child (<http://www.irs.gov/taxtopics>). Please consult your tax advisor.



If you have any questions, please contact the CDSS Adoptions Regional/Field Office or the delegated county adoption agency (Alameda, Los Angeles, or San Diego) in your area for more information. You may also check CDSS' website at [www.childsworld.ca.gov](http://www.childsworld.ca.gov).



## INDEPENDENT ADOPTION FEE REDUCTION REQUEST FORM

LAST, FIRST	LAST, FIRST
STREET, CITY, STATE, ZIP CODE	AREA CODE/PHONE NUMBER (      )
COUNTY OF RESIDENCE	

**In order to be considered for a fee reduction the following information **MUST** be attached to this request and received within 30 days, otherwise your request will be denied:**

- ✓ Copy of current filed 1040 Tax Statements/Returns
- ✓ Employment Verification (if employed)

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

- ✓ TOTAL ANNUAL INCOME FROM **ALL** SOURCES: \$\_\_\_\_\_
- ✓ NUMBER OF DEPENDENTS:\_\_\_\_\_  
(include yourself, children under age 18 and child(ren) to be adopted)
- ✓ FINANCIAL ASSETS (if available within 30 days):  
Checking: \$\_\_\_\_\_ Savings: \$\_\_\_\_\_ Stocks & Bonds: \$\_\_\_\_\_  
Accounts Receivables: \$\_\_\_\_\_ Real Estate Total Equity: \$\_\_\_\_\_  
Life Insurance (cash value): \$\_\_\_\_\_ Other Assets/Resources:\$\_\_\_\_\_
- ✓ EXPLANATION OF WHY PAYING THE FULL FEE WOULD CAUSE ECONOMIC HARDSHIP TO YOU AND WOULD BE A DETRIMENT TO THE CHILD BEING ADOPTED (ATTACH PAGES, IF NECESSARY):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF REQUESTING PERSON	DATE
SIGNATURE OF REQUESTING PERSON	DATE

**FOR CDSS/COUNTY USE ONLY:**

State/County Office: \_\_\_\_\_ Completed by: \_\_\_\_\_

Date Petition Filed: \_\_\_\_\_ Court Petition #:\_\_\_\_\_ Worksheet Attached:  Yes  No

Approved Fee Reduction Amount \$ \_\_\_\_\_  Denied

Rational for Adoption Fee/Reason for Denial:  
\_\_\_\_\_  
\_\_\_\_\_

Signature of State/County Office Manager/Supervisor	Printed Name	Date
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**SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA**  
**200 South G Street**  
**Madera, Ca 93637**

(For Court Use Only)

**Need an interpreter? | ¿Necesita un intérprete?**

**REQUEST FOR INTERPRETER SERVICES | solicitud para servicios de un intérprete**

Fill out this form if you or your witness in your case needs an interpreter when you are in court. | Si usted o un testigo en su caso necesita un intérprete cuando esté en la corte, llene este formulario.

**Case Number(s)** | numero(s) del caso: \_\_\_\_\_

**Case Name** | nombre del caso: \_\_\_\_\_

**Hearing Date** | fecha de audiencia: \_\_\_\_\_

**Time** | hora: \_\_\_\_\_

**Dept** | sala: \_\_\_\_\_

**INTERPRETER NEEDED IN THE FOLLOWING LANGUAGE |** necesito un intérprete para el siguiente idioma:

- |  |                                       |  |  |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Spanish/español | <input type="checkbox"/> Chatino*     | <input type="checkbox"/> Cambodian     | <input type="checkbox"/> Arabic            |
| <input type="checkbox"/> Amuzgo*         | <input type="checkbox"/> Triqui Alto* | <input type="checkbox"/> Cantonese     | <input type="checkbox"/> Russian           |
| <input type="checkbox"/> Mixteco Alto*   | <input type="checkbox"/> Triqui Bajo* | <input type="checkbox"/> Mandarin      | <input type="checkbox"/> Hmong             |
| <input type="checkbox"/> Mixteco Bajo*   | <input type="checkbox"/> Punjabi      | <input type="checkbox"/> Farsi/Persian | <input type="checkbox"/> Lao               |
| <input type="checkbox"/> Zapoteco*       | <input type="checkbox"/> ASL          | <input type="checkbox"/> Vietnamese    | <input type="checkbox"/> Other/Otro: _____ |

\*For indigenous languages, include country, state, municipality and town of origin | para los idiomas indígenas, incluya su país, estado, municipio y ciudad de origen: \_\_\_\_\_

**INTERPRETER NEEDED FOR |** se necesita intérprete para:

- Plaintiff/Petitioner  
 Demandante/Solicitante
- Defendant/Respondent  
 Demandado(a)

\_\_\_\_\_ # of Witnesses | cantidad de testigos

Estimated duration time of witness | tiempo estimado de duración del testimonio: \_\_\_\_\_

**REQUESTING PARTY'S INFORMATION |** datos del solicitante:

**Name** | nombre: \_\_\_\_\_

**Email** | correo electrónico: \_\_\_\_\_

**Phone Number** | número de teléfono: \_\_\_\_\_

**Please email this request to |** favor de enviar esta solicitud por correo electrónico a:

[Interpreter.Madera@madera.courts.ca.gov](mailto:Interpreter.Madera@madera.courts.ca.gov)

or file it with the clerk's office | ó entregue este formulario a la oficina del secretario

**Please submit this form with a minimum of ten (10) court days in advance. |** favor de entregar este formulario con un mínimo de diez (10) días hábiles antes de la fecha de su audiencia.

# ADOPT-200 Adoption Request

Clerk stamps date here when form is filed.

## Instructions

This request must be completed for agency, independent, intercountry, and tribal customary adoptions. For a stepparent adoption or a stepparent adoption to confirm parentage, use *Stepparent Adoption Request* (form ADOPT-203). Fill out one adoption request for each child to be adopted.

You may also need to provide additional forms, certified documents, or other paperwork to inform the judge of the status of a parent or possible parent who may have parental rights in these proceedings and how that parent will or will not participate in these proceedings.

For more information on the different types of adoptions and how to determine the status of a parent and the documentation that may be required, see form ADOPT-050-INFO, [selfhelp.courts.ca.gov/adoptions](http://selfhelp.courts.ca.gov/adoptions), or visit your local county court self-help center before filling out this form.

### 1 Adopting parent(s)

- a. Name: \_\_\_\_\_
- b. Name: \_\_\_\_\_
- c. Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- d. Relationship to child: \_\_\_\_\_
- e. Lawyer (if any) (name, address, telephone numbers, email address, and State Bar number): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of  
MADERA**

200 SOUTH G STREET  
MADERA, CA 93637  
CIVIL DIVISION

Court fills in case number when form is filed.

**Case Number:**

Check this box if there are more adopting parents. Use a separate piece of paper and write "ADOPT-200, Other Adoptive Parents" at the top and complete a-e. Turn it in with this form.

### 2 Hearing is set for:

(To be completed by the clerk of the superior court if a hearing date is available.)



Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m. Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

Name and address of court if different from above: \_\_\_\_\_

**To the person served with this request:** If you do not come to this hearing, the judge can order the adoption without your input.

### 3 Each adopting parent:

- a. Is at least 10 years older than the child or meets the criteria in Family Code section 8601(b);
- b. Will treat the child as their own;
- c. Will support and care for the child;
- d. Has a suitable home for the child; *and*
- e. Agrees to adopt the child.

Adopting parent or parents: \_\_\_\_\_

**4 County of filing**This *Adoption Request* is filed in this court because (*check all that apply*):

- a.  An adopting parent lives in this county;
- b.  The child was born in or the child now lives in this county;
- c.  An office of the agency that placed the child or is filing the request for adoption is located in this county;
- d.  An office of the department or public adoption agency that is investigating the request is located in this county;
- e.  A placing birth parent lived in this county when the adoptive placement agreement, consent, or relinquishment was signed;
- f.  A placing birth parent lived in this county when the request was filed;
- g.  The child was freed for adoption in this county.

(Note: If the child is a dependent of the court (in foster care), this *Adoption Request* must be filed in the county where the child was freed for adoption or the county where the adopting parent or parents reside. See Family Code sections 8714 and 8714.5). For more information on dependent children, [selfhelp.courts.ca.gov/juvenile-dependency](http://selfhelp.courts.ca.gov/juvenile-dependency).

**5 Type of adoption**

Check one of the following:

- a.  Agency (*name*): \_\_\_\_\_  Relative  Nonrelative  
 Tribal customary adoption (*attach tribal customary adoption order*)
- b.  Independent:  Relative  Nonrelative  Additional Parent (more than two)
- c.  Intercountry (*name of agency*): \_\_\_\_\_

**6 Information about the child**

- a. Child's name before adoption (only for independent, intercountry, tribal customary adoption, or dependent child's adoption by a relative (Family Code, § 8714.5):  
\_\_\_\_\_
- b. Gender:  Female  Male  Nonbinary
- c. Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_
- d. Child's address (*if different from address of adopting parent or parents*):  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- e. Place of birth (*if known*): City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_
- f. If the child is 12 or older, does the child agree to the adoption?  Yes  No
- g. Date child was placed in the physical care of the adopting parents: \_\_\_\_\_
- h. The child was conceived by assisted reproduction in compliance with Family Code section 7613.  Yes  No
- i. The child is a dependent of the court.  Yes  No (If yes, add Juvenile Case No. and County)  
Juvenile Case No. \_\_\_\_\_ County: \_\_\_\_\_
- j.  The child's new name will be: \_\_\_\_\_

Adopting parent or parents: \_\_\_\_\_

**7 Legal guardian**Does the child have a legal guardian?  Yes  No (If yes, attach *Letters of Guardianship* and fill out below.)

- a. Date guardianship ordered: \_\_\_\_\_
- b. County: \_\_\_\_\_
- c. Case number: \_\_\_\_\_

**8 Inquiry and notice under the Indian Child Welfare Act (ICWA)**

- a.  The inquiry required under law to determine whether the child may be an Indian child has been made, and a completed *Indian Child Inquiry Attachment* (form ICWA-010(A)) is attached.  
Note: In agency adoptions, it is the responsibility of the agency to ensure that this inquiry is conducted and the form is made part of the file. In independent adoptions, the adoption service provider, CDSS Regional Office, or delegated county adoption agency is responsible. For adoptions of a dependent child under the Welfare and Institutions Code, other evidence, including court orders regarding ICWA, may be necessary.
- b.  A completed version of *Parental Notification of Indian Status* (form ICWA-020) is attached OR a good faith attempt has been made to provide the form to the parents, Indian custodian, or guardian of the child and inform them that they are required to complete and submit the form to the court.  
Note: In agency adoptions, it is the responsibility of the agency to ensure that these forms are made part of the file. In independent adoptions, the adoption service provider, CDSS Regional Office, or delegated county adoption agency is responsible.
- c.  There is **reason to know** that this child is an Indian child. Notice of the adoption request will be provided to the child's tribe or tribes, parents, Indian custodian, and the Bureau of Indian Affairs, using *Notice of Child Custody Proceeding for Indian Child* (form ICWA-030).

For more information on these requirements and for definitions, see form ADOPT-050-INFO.

**9 Adoption of an Indian child**

- a.  This is an adoption of an Indian child. The adopting parent or parents have filled out and attached *Adoption of Indian Child* (form ADOPT-220) and will bring *Parent of Indian Child Agrees to End Parental Rights* (form ADOPT-225) to the hearing.
- b.  This is a tribal customary adoption under Welfare and Institutions Code section 366.24. Parental rights have been modified under and in accordance with the attached tribal customary adoption order, and the child has been ordered placed for adoption.

**10 Agency adoption information**

- a.  The adopting parent or parents have received information about the Adoption Assistance Program, the Regional Center, mental health services available through Medi-Cal or other programs, and federal and state tax credits that may be available.
- b.  Joinder is being filed at same time as this *Adoption Request*.
- c.  Joinder will be filed.

Adopting parent or parents: \_\_\_\_\_

**11 Independent adoption information**

- a. The adopting parent or parents will file promptly with the department or delegated county adoption agency the information required by the department in the investigation of the proposed adoption.
- b.  A copy of the *Independent Adoption Placement Agreement* from the California Department of Social Services is attached. (This is required in most independent adoptions; see Family Code section 8802.)
- c.  All persons with parental rights agree to the adoption and have signed the *Independent Adoptive Placement Agreement* or consent on the appropriate California Department of Social Services form.

*(List the name and relationship to child of each person who has not signed the agreement form):*

- d.  The child will have more than two parents. The following persons with existing parental rights agree to this adoption and will maintain their existing parental rights:

(1) Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

- (2) An agreement waiving termination of parental rights, signed by both the existing parents and the adopting parent or parents, was filed with the court.

**Note:** If a person who may have parental rights has not signed a consent or relinquishment, the adopting parent or parents must obtain other signed documents or file for termination of parental rights or other action.

**12 Intercountry and California re-adoption questions**

- a.  This adoption may be subject to the Hague Adoption Convention (form ADOPT-216 may be required to be filed with this request. See *Calif. Rules of Court 5.490-5.493*).
- b.  This is an adoption conducted under the requirements of the Hague Adoption Convention and the child has already moved with the adopting parent or parents to another Hague Convention member country or will be moving at the conclusion of this adoption.

Child will be moving or has moved to (name of country): \_\_\_\_\_

Adopting parent or parents:  seek(s) a California adoption  will be petitioning for a Hague Adoption Certificate  will be seeking a Hague Custody Declaration.

- c.  This is an intercountry re-adoption. The adoption was finalized in another country before the child entered the United States with the adopting parent or parents.

Date the child entered the United States: \_\_\_\_\_

See form ADOPT-050-INFO for a list of documents to attach to this *Adoption Request*.

**13 Contact after adoption (optional)**

*Contact After Adoption Agreement* (form ADOPT-310) (Family Code, § 8616.5)

- a.  is attached.
- b.  is attached as required in Family Code section 8714.50 (dependent child agency adoption).
- c.  will be completed as required in Welfare and Institutions Code section 16002 between siblings and filed before the adoption hearing.
- d.  will be filed before the adoption hearing.
- e.  This is a tribal customary adoption. Postadoption contact is governed by the attached tribal customary adoption order.

For more information, see form ADOPT-050-INFO.

Adopting parent or parents: \_\_\_\_\_

**Additional Information Needed**

If there are any other persons who are or may be the child's parent, you will be required to obtain additional forms, submit specified paperwork, and possibly participate in additional court proceedings. Other paperwork or additional court proceedings may be necessary. During the adoption process, you must provide additional documents to the court or the department or agency handling your home study. These documents can include:

- Consent or relinquishment for adoption—properly signed and accepted by court.
- Death certificates, prior court orders, or pending court orders.
- Waiver or denial of parentage—properly signed and accepted by court.

Additional court proceedings can include:

- Filing a petition and order freeing the child from parental custody and control. This is a separate action.
- Filing a petition and order terminating parental rights of an alleged father. This action can be filed within the adoption process.

Important: Seek the advice of an attorney. Refer to form ADOPT-050-INFO, see also <https://selfhelp.courts.ca.gov/adoptions>, or visit your local county court self-help center for more information.

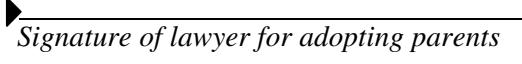
**14 Requests to court**

- a.  The adopting parent or parents ask the court to approve the adoption and to declare that the adopting parent or parents and the child have the legal relationship of parent and child, with all the rights and duties of this relationship, including the right of inheritance.
- b.  The adopting parent or parents ask the court to date its order approving the adoption as of an earlier (date): \_\_\_\_\_ for the following reason (Family Code section 8601.5): \_\_\_\_\_

*(Enter a date no earlier than the date parental rights were ended.)*

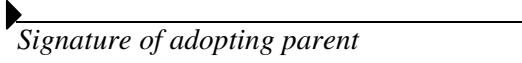
- c.  This is a tribal customary adoption. The adopting parent or parents ask the court to approve the adoption and to declare that the adopting parent or parents and the child have the legal relationship of parent and child, with all of the rights and duties stated in the attached tribal customary adoption order and in accordance with Welfare and Institutions Code section 366.24.

**15** If a lawyer is representing you in this case, the lawyer must sign here:

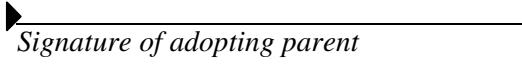
Date: \_\_\_\_\_ *Type or print lawyer's name* 

*Signature of lawyer for adopting parents*

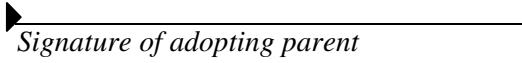
**16** I declare under penalty of perjury under the laws of the State of California that the information in this form and all its attachments is true and correct to my knowledge. This means that if I lie on this form, I am guilty of a crime.

Date: \_\_\_\_\_ *Type or print your name* 

*Signature of adopting parent*

Date: \_\_\_\_\_ *Type or print your name* 

*Signature of adopting parent*

Date: \_\_\_\_\_ *Type or print your name* 

*Signature of adopting parent*

**NOTICE—ACCESS TO AFFORDABLE HEALTH INSURANCE:** Do you or someone in your household need affordable health insurance? If so, you should apply for Covered California. Covered California can help reduce the cost you pay toward high-quality affordable health care. For more information, visit [www.coveredca.com](http://www.coveredca.com). Or call Covered California at 1-800-300-1506 (English) or 1-800-300-0213 (Spanish).

CHILD'S NAME:	CASE NUMBER:
---------------	--------------

1. Name of child:

2. (Check one)

I have not yet been able to complete the inquiry about the child's Indian status because:

I understand that I have an affirmative and continuing duty to complete this inquiry. I will do it as soon as possible and advise the court of my efforts.

I have asked or  I am advised by: \_\_\_\_\_ and on information and belief confirm that this person has completed inquiry by asking the child, the child's parents, and other required and available persons about the child's Indian status. Each of these persons was asked whether they had any information that the child is or may be an Indian child; whether the parents or child are or were domiciled or lived on a reservation, rancheria, Alaska Native village, or other tribal trust land, or had ancestors who were members of an Indian tribe. The person(s) questioned are:

Name:

Name:

Address:

Address:

City, state, zip:

City, state, zip:

Telephone:

Telephone:

Date questioned:

Date questioned:

Relationship to child:

Relationship to child:

Additional persons questioned and their information is attached. (Form MC-020 may be used for this purpose.)

3. This inquiry (check one)

gave me reason to believe the child is or may be an Indian child. (If checked, continue to 4.)

gave me no reason to believe the child is or may be an Indian child. (If checked, continue to signature page at end of form.)

4.  I contacted the tribe(s) that the child may be affiliated with and worked with them to establish whether the child is a member or citizen or eligible for membership or citizenship in the tribe(s). Information detailing the tribes contacted, the names of the individuals contacted, and the manner of the contacts is attached.

5. Based on inquiry and tribal contacts (check all that apply):

a.  the child is or may be a member or citizen of or eligible for membership or citizenship in a tribe.

Name of tribe(s):

Location of tribe(s):

b.  the child's parents, grandparents, or great-grandparents are or were members or citizens of a tribe.

Name of tribe(s):

Location of tribe(s):

c.  the residence or domicile of the child, child's parents, or Indian custodian is on a reservation, rancheria, Alaska Native village, or other tribal trust land.

d.  the child or the child's family has received services or benefits from a tribe or services that are available to Indians from tribes or the federal government, such as the Indian Health Service or Tribal Temporary Assistance to Needy Families (TANF).

e.  the child is or has been a ward of a tribal court.

Name of tribe(s):

Location of tribe(s):

f.  either parent or the child possesses an Indian identification card indicating membership or citizenship in an Indian tribe.

Name of tribe(s):

Location of tribe(s):

CHILD'S NAME:	CASE NUMBER:
---------------	--------------

6. If this is a delinquency proceeding under Welfare and Institutions Code section 601 or 602,
- the child is in foster care.
- it is probable the child will be entering foster care.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

---

(TYPE OR PRINT NAME)

---

(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NUMBER:	<b>FOR COURT USE ONLY</b>
NAME:		
FIRM NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
TELEPHONE NO.:	FAX NO.:	
EMAIL ADDRESS:		
ATTORNEY FOR (name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA</b>		
STREET ADDRESS: 200 South G Street		
MAILING ADDRESS: 200 South G Street		
CITY AND ZIP CODE: Madera, California 93637		
BRANCH NAME: CIVIL DIVISION		
CHILD'S NAME:		
<b>PARENTAL NOTIFICATION OF INDIAN STATUS</b>		CASE NUMBER:

**To the parent, Indian custodian, or guardian of the above named child: You must provide all the requested information about the child's Indian status by completing this form. If you get new information that would change your answers, you must let your attorney, all the other attorneys on the case, and the social worker or probation officer, or the court investigator know immediately and an updated form must be filed with the court.**

1. Name:

2. Relationship to child:  Parent  Indian custodian  Guardian  Other:

**Indian status**

3. a.  I am or may be a member or citizen of, or eligible for membership or citizenship in, a federally recognized Indian tribe.  
Name of tribe(s) (name each):

Location of tribe(s):

b.  The child is or may be a member or citizen of, or eligible for membership or citizenship in, a federally recognized Indian tribe because (state why you think the child is or may be a member or citizen or eligible for membership or citizenship in the tribe):

Name of tribe(s) (name each):

Location of tribe(s):

c.  One or more of the child's parents, grandparents, or other lineal ancestors is or was a member or citizen of a federally recognized tribe.

Name of tribe(s) (name each):

Location of tribe(s):

Name and relationship of ancestor(s):

d.  I am a resident of or am domiciled, live, or have lived on a reservation, rancheria, Alaska Native village, or other tribal trust land.

e.  The child is a resident of or is domiciled, lives, or has lived on a reservation, rancheria, Alaska Native village, or other tribal trust land.



CHILD'S NAME:	CASE NUMBER:
---------------	--------------

3. f.  The child is or has been a ward of a tribal court of the \_\_\_\_\_ tribe.
- g.  Either parent or the child possesses an Indian identification card indicating membership or citizenship in an Indian tribe.  
Name of tribe(s) (name each): \_\_\_\_\_
- Membership or citizenship number (if any): \_\_\_\_\_
- h.  None of the above apply.

4. A previous form ICWA-020  has  has not been filed with the court.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_



(TYPE OR PRINT NAME)

(SIGNATURE)

**Note: This form is not intended to constitute a complete inquiry into Indian heritage. Additional inquiry may be required by the Indian Child Welfare Act and state law.**

# ADOPT-230 Adoption Expenses

Clerk stamps date here when form is filed.

If you are adopting your stepchild, do not fill out this form.

**1** Your name (adopting parent):

a. \_\_\_\_\_  
b. \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Address (skip this if you have a lawyer):

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Lawyer(if any): (Name, address, telephone number, and State

Bar number): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of  
MADERA  
200 South G Street  
Madera, CA 93637**

Fill in case number if known:

**Case Number:**

**2** Name of child after adoption:

\_\_\_\_\_

**3** List the services you received that were related to the adoption of the child listed in **(2)** :

<b>Service</b>	<b>Name and address of service provider</b>	<b>How much paid, or value of service</b>	<b>Payment date</b>
a. Hospital	_____ _____	\$ _____	_____
b. Prenatal care	_____ _____	\$ _____	_____
c. Legal fees paid	_____ _____	\$ _____	_____
d. Adoption agency fee paid	_____ _____	\$ _____	_____
e. Transportation	_____ _____	\$ _____	_____
f. Adoption facilitator fees paid	_____ _____	\$ _____	_____

Case Number: \_\_\_\_\_

Your name: \_\_\_\_\_

<b>Service</b>	<b>Name and address of service provider</b>	<b>How much paid, or value of service</b>	<b>Payment date</b>
g. Counseling fees paid	_____	\$_____	_____
h. Adoption service provider	_____	\$_____	_____
i. Pregnancy expenses paid	_____	\$_____	_____
j. Court filing fees paid	_____	\$_____	_____
k. Fingerprinting fees paid	_____	\$_____	_____
l. Other	_____	\$_____	_____

*If you need more space, attach a sheet of paper and write "ADOPT-230, Item 3-Payment for Services" at the top.*

Number of pages attached: \_\_\_\_\_

4 I declare under penalty of perjury under the laws of the State of California that I have listed all payments (or anything of value) that I have paid or agreed to pay, or that were paid on my behalf, related to the child I want to adopt. I declare under penalty of perjury under the laws of the State of California that the information in this form is true and correct, which means that if I lie on this form, I am guilty of a crime.

Date: \_\_\_\_\_ *Type or print your name* → *Signature of adopting parent*

Date: \_\_\_\_\_ *Type or print your name* → *Signature of adopting parent*

# ADOPT-215 Adoption Order

Clerk stamps date here when form is filed.

## 1 Adopting parent or parents

- a. Name: \_\_\_\_\_  
b. Name: \_\_\_\_\_  
c. Name: \_\_\_\_\_  
d. Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime telephone number: \_\_\_\_\_  
e. Additional street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime telephone number: \_\_\_\_\_  
f. Lawyer (if any) (name, address, telephone number, email address, and State Bar number): \_\_\_\_\_  
\_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of MADERA**  
200 SOUTH G STREET  
MADERA, CA 93637  
CIVIL DIVISION

Court fills in case number when form is filed.

**Case Number:**

## 2 Information about the child

- Child's name after adoption:  
a. First name: \_\_\_\_\_  
b. Middle name: \_\_\_\_\_  
c. Last name: \_\_\_\_\_  
d. Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_  
e. Place of birth (if known): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

## 3 Name of adoption agency (if any): \_\_\_\_\_

## 4 Hearing details

- a. Hearing date: \_\_\_\_\_ Dept.: \_\_\_\_\_ Div.: \_\_\_\_\_ Rm.: \_\_\_\_\_  
b. Judicial officer: \_\_\_\_\_ Clerk's office telephone number: \_\_\_\_\_  
c. People present at the hearing:

- Adopting parent or parents       Lawyer for adopting parent or parents  
 Child       Child's lawyer  
 Parent or parents keeping parental rights: \_\_\_\_\_  
 Other people present (list each name and relationship to child): \_\_\_\_\_

- (1) \_\_\_\_\_  
(2) \_\_\_\_\_

Check here if there are more names. Attach a sheet of paper, write "ADOPT-215, Item 4" at the top, and list the additional names and each person's relationship to child. You may use form MC-025, Attachment.

Adopting parent or parents: \_\_\_\_\_

- 4 d.  The hearing is waived pursuant to Family Code section 9000.5 (*Check this box only if this is an adoption confirming parentage of a parent who was married to or in a state-registered domestic partnership, including a registered domestic partnership or civil union from another jurisdiction, with the legal parent at the time the child was born.*)

**Judge will fill out section below.**

- 5 The judge finds that the child (*check all that apply*):

- a.  Is 12 or older and agrees to the adoption
- b.  Is under 12
- c.  Is not required to consent because this is a tribal customary adoption.

- 6 The judge has reviewed the report and other documents and evidence and finds that:

- a. Proper notice to all persons with actual or possible parental rights has been provided and their voluntary or nonvoluntary participation is documented in the court file.
- b. Each adopting parent:
  - (1) Is at least 10 years older than the child or meets the criteria in Family Code section 8601(b);
  - (2) Will treat the child as their own;
  - (3) Will support and care for the child;
  - (4) Has a suitable home for the child; *and*
  - (5) Agrees to adopt the child.

- 7 Child's name before adoption

*Complete for nonrelative agency, independent, intercountry, or stepparent adoption.*

*If this is an adoption of a dependent child by a relative filed under Family Code section 8714.5, complete only if requested by the adopting relative or by the child being adopted, if 12 years of age or older.*

First name: \_\_\_\_\_ Middle name: \_\_\_\_\_ Last name: \_\_\_\_\_

- 8  The child is an Indian child. The judge finds that this adoption meets the placement requirements of the Indian Child Welfare Act or that there is good cause to give preference to these adopting parent or parents. The clerk will fill out 14 below.

- 9  The judge approves the *Contact After Adoption Agreement* (form ADOPT-310)  
 As submitted     As amended on ADOPT-310

- 10  This is a tribal customary adoption. The tribal customary adoption order of the \_\_\_\_\_ tribe dated \_\_\_\_\_ containing \_\_\_\_ pages and attached hereto is fully incorporated into this order of adoption.

- 11  This is an adoption under the Hague Adoption Convention. *Verification of Compliance with Hague Adoption Convention Attachment* (form ADOPT-216) is attached and fully incorporated into this order.

Adopting parent or parents: \_\_\_\_\_

**12**  (Do not complete for intercountry adoptions.) The child will have more than two parents. The following persons with existing parental rights agree to this adoption and will maintain their existing parental rights:

- a. Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_
- b. An agreement waiving termination of parental rights, signed by both the existing parents and the adopting parent or parents, was filed with the court.

**13** The judge believes the adoption is in the child's best interest and orders this adoption. The child's name after adoption will be:

First name: \_\_\_\_\_ Middle name: \_\_\_\_\_ Last name: \_\_\_\_\_

The adopting parent or parents and the child are now parent and child under the law, with all the rights and duties of the parent-child relationship or, in the case of a tribal customary adoption, all the rights and duties set out in the tribal customary adoption order and Welfare and Institutions Code section 366.24.

The judge believes it will serve public policy and the best interest of the child to grant the request of the adopting parent or parents for the court to make this order effective as of (date): \_\_\_\_\_.

Date: \_\_\_\_\_  
 (Date of Signature)

Judge (or Judicial Officer)

**Clerk will fill out section below.**

**14 Clerk's Certificate of Mailing**

For the adoption of an Indian child, the clerk certifies:

I am not a party to this adoption. I placed a filed copy of:

- Adoption Request (form ADOPT-200)  Adoption of Indian Child (form ADOPT-220)  
 Adoption Order (form ADOPT-215)  Contact After Adoption Agreement (form ADOPT-310)

in a sealed envelope, marked "Confidential" and addressed to:

Chief, Division of Social Services  
 Bureau of Indian Affairs  
 1849 C Street, NW  
 Mail Stop 310-SIB  
 Washington, DC 20240

The envelope was mailed by U.S. mail, with full postage, from:

Place: \_\_\_\_\_ on (date): \_\_\_\_\_

Date: \_\_\_\_\_ Clerk, by: \_\_\_\_\_ , Deputy

# ADOPT-210 Adoption Agreement

Clerk stamps date here when form is filed.

## 1 Adopting parent or parents

a. Name: \_\_\_\_\_  
b. Name: \_\_\_\_\_  
c. Address (skip this if you have a lawyer): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
d. Lawyer (if any) (name, address, telephone numbers, e-mail address, and State Bar number): \_\_\_\_\_  
\_\_\_\_\_

Check this box if there are more adopting parents. Use a separate piece of paper and write "ADOPT-210, Other Adopting Parents" at the top and complete a-d. Turn it in with this form.

Fill in court name and street address:

**Superior Court of California, County of MADERA**  
200 SOUTH G STREET  
MADERA, CA 93637  
CIVIL DIVISION

Court fills in case number when form is filed.

**Case Number:** \_\_\_\_\_

## 2 Information about the child

Child's name before adoption: \_\_\_\_\_  
Child's name after adoption: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

### ***Signing this form:***

- Adoptions usually require a hearing where most signatures on this form must be completed in front of a judge.
- Item ⑤ may be signed before the hearing.
- If this is a stepparent adoption to confirm parentage involving a spouse or registered domestic partner who gave birth to the child or established parentage over a child born through gestational surrogacy during the union, usually no hearing is required and you may sign this form in front of a proper witness. See item 9a for instructions on having your signature properly witnessed. If the court orders a hearing in this case, you must sign this form at the hearing in front of the judge.
- All other signatures must be signed at a hearing, in front of a judge, unless waived by the judge for good cause.

**3** I am the child listed in ② and I agree to the adoption. (Not required in the case of a tribal customary adoption under Welf. & Inst. Code, § 366.24.)

Date: \_\_\_\_\_  
Type or print your name

Signature of child (child must sign if 12 or older; optional if child is under 12)

**4** If there is one adopting parent (including stepparent), read and sign:

I am the adopting parent listed in ①, and I agree that the child will:

- Be adopted and treated as my legal child (Fam. Code § 8612(b)) and
- Have the same rights as a natural child born to me, including the right to inherit my estate.

Date: \_\_\_\_\_  
Type or print your name

Signature of adopting parent

Adopting parent or parents: \_\_\_\_\_

**5** If the adopting parent is married and not separated, the consent of their spouse is required (Family Code, § 8603). Spouse must sign here:

I am married to, or am the registered domestic partner of, the adopting parent listed in ①, and I am not a party to this adoption. I agree to the adoption of the child by the adopting parent listed in ①.

Date: \_\_\_\_\_  
Type or print your name

Signature of spouse or registered domestic partner  
(may be signed before hearing)

**6** For stepparent adoptions only:

If you are the legal parent of the child listed in ②, read and sign below.

I am the legal parent of the child and am the spouse or registered domestic partner of the adopting parent listed in ①. I agree to the adoption of my child by the adopting parent listed in ①.

Date: \_\_\_\_\_  
Type or print your name

Signature of legal parent

**7** If there is more than one adopting parent, read and sign below.

We are the adopting parents listed in ①, and we agree that the child will:

- Be adopted and treated as our legal child (Fam. Code, § 8612(b)) and
- Have the same rights as a natural child born to us, including the right to inherit our estate.

I agree to the other parent's or parents' adoption of the child.

Date: \_\_\_\_\_  
Type or print your name

Signature of adopting parent

I agree to the other parent's or parents' adoption of the child.

Date: \_\_\_\_\_  
Type or print your name

Signature of adopting parent

I agree to the other parent's or parents' adoption of the child.

Date: \_\_\_\_\_  
Type or print your name

Signature of adopting parent

Check this box if there are more adopting parents. Use a separate piece of paper and write "ADOPT-210, Item 7" at the top and include name, signature, and date signed. Turn it in with this form.

**8** If this is a tribal customary adoption, read and sign below.

I or we are the adopting parents listed in ①, and I or we agree that the child will:

- Be adopted and treated as my/our legal child (Fam. Code, § 8612(b)) and
- Have the same rights and duties stated in the tribal customary adoption order dated \_\_\_\_\_ (copy attached).

Adopting parent or parents: \_\_\_\_\_

8 Date: \_\_\_\_\_

Type or print your name

Signature of adopting parent

Date: \_\_\_\_\_

Type or print your name

Signature of adopting parent

Check this box if there are more adopting parents. Use a separate piece of paper and write "ADOPT-210, Item 8" at the top and include name, signature, and date signed. Turn it in with this form.

## 9 Executed (check one):

a.  This form was signed outside of a hearing. (Select this option for either a stepparent adoption to confirm parentage under Family Code section 9000.5, where the court did not order a hearing for good cause, or if the court waived appearance under Family Code, section 8613 or 8613.5.)

(1)  This form was signed in California.

This form was signed in front of the following type of witness (check one):

- Notary public (the notary acknowledgment is attached)
- Court clerk
- Probation officer
- Qualified court investigator
- Authorized representative of a licensed adoption agency
- County welfare department staff member

(2)  This form was signed outside of California.

This form was signed in front of the following type of witness (check one):

- Notary public (the notary acknowledgment is attached)
- Other person authorized to perform notarial acts (proof of notarization is attached)
- Authorized representative of an adoption agency that is licensed in the state or country where this form was signed

(3) Witness information

This form was signed in: (county) \_\_\_\_\_ (state) \_\_\_\_\_ (country) \_\_\_\_\_

Name of witness: \_\_\_\_\_

Agency witness works for (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_

Witness signature: ➔ \_\_\_\_\_

b.  This form was signed at a hearing in front of a judicial officer. (The judge will date and sign the form below.)

c.  This form was signed by the adopting parent or parents either before or while the adopting parent or parents were attending a remote hearing and was acknowledged by the judicial officer. (The judge will date and sign the form below.)

Date: \_\_\_\_\_

Judge or Judicial Officer