

FORMAT FOR ADOPTION COURT REPORT TO PROBATE COURT

ADOPTION FINALIZATION REPORT

Report to: The Honorable _____
Probate Court, District of _____

Re Petition to Adopt: (Child's birth name)
To Be Known As: (Child's adoptive name)
Date of Birth:
Place of Birth:
Social Security Number:
Address

Town of Legal Residence:

Biological Mother: Name
Date of Birth:
Place of Birth:
Social Security Number:
Address

Biological Father:
(and/or Legal Father) Name
Date of birth:
Place of Birth:
Social Security Number:
Address

Petitioning Mother: Name
Date of Birth:
Place of Birth:
Address

Petitioning Father: Name
Date of Birth:
Place of Birth:
Address

Petitioning Parties Marriage: _____ and _____ were married on
_____ in _____.

Child on Petition: The child's legal history, including the dates, courts of jurisdiction and circumstances of divorce action affecting the child, initial and subsequent voluntary or court commitments, and termination of parental rights.

Child's Background and History: Full name, date and place of birth. Details about the child's developmental and social history, as far as is known, both before and after commitment to DCF custody. Information about the child's siblings, including names and dates of birth and current whereabouts. The child's history within the DCF system, including names and dates of placements. Child's current adjustment, strengths and needs, including adoption readiness.

Biological Mother: Full name, date and place of birth. Names of parents and siblings, if known. Social and medical history as a child and adult. Stress positive characteristics. Circumstances under which the child became free for adoption.

Biological Father: Same as for biological mother.

Petitioning Mother: Full name, date and place of birth. Social history, especially as it relates to parenting abilities.

Petitioning Father: Same as petitioning mother.

Marital and Family Relationships: Date and place of marriage. History of the marriage, including the strengths of the relationship. Names, dates of birth and circumstances of biological and adopted children. Parenting style.

Housing and Finances: Brief description of home, including whether owned or rented. Family financial status, including amount and sources of income. Significant information about debts. Ability to support the adopted child, including need for adoption subsidy.

References: Summary of content of references, using specific information from references that support the recommendation for finalization.

Supervisory period: Adoption Social Worker's and past social worker's observations and assessment of the child's and family's adjustment. If placement has been problematic in the past, the nature of the problems and how they have been resolved.

Recommendation: "It is recommended that the adoption of (Child's full name), to be known as (Child's Adoptive Name) by (Petitioning Parent(s) Name(s)) be made final (or other recommended action) forthwith (or other appropriate time frame)."

Respectfully submitted,

Adoption Social Worker

Date

Regional Adoption Supervisor

Date

Social and Rehabilitation Services
Address