

**PRIVATE-PLACEMENT ADOPTION  
INFORMATION QUESTIONNAIRE**

*Please fill out this form as fully as possible. Return it to attorney, along with items requested in "Notes" section.*

Adoptive Parent 1:

Full Name:	
Maiden Name:	
Sex:	
Address:	
Mailing Address:	
County:	
Phone Number:	
E-mail Address:	
Date of Birth:	
State/Country of Birth:	
Social Security #:	
Religion:	
Occupation:	
Annual Income:	
Marital Status:	
Name of Spouse:	
Date of Marriage:	
Names of Any Prior Spouses:	
Dates of Death/Divorce of Prior Spouses:	
Has Adoptive Parent ever been the subject of an indicated report of child abuse/neglect? If so, list details:	
Has Adoptive Parent ever been convicted of a crime? If so, list date, location of conviction:	

Adoptive Parent #2:

Full Name:	
Maiden Name:	
Sex:	
Address:	
Mailing Address:	
County:	
Phone Number:	
E-mail Address:	
Date of Birth:	
State/Country of Birth:	
Social Security #:	
Religion:	
Occupation:	
Annual Income:	
Marital Status:	
Name of Spouse:	
Date of Marriage:	
Names of Any Prior Spouses:	
Dates of Death/Divorce of Prior Spouses:	
Has Adoptive Parent ever been the subject of an indicated report of child abuse/neglect? If so, list details:	
Has Adoptive Parent ever been convicted of a crime? If so, list date, location of conviction:	

Natural Father:

Full Name:	
Last Known Address:	
Date of Birth:	

State/Country of Birth:	
Social Security #:	
Religion:	
Heritage/Race:	
Education:	
Height:	
Weight:	
Hair Color:	
Eye Color:	
Skin Color:	

Natural Mother:

Full Name:	
Last Known Address:	
Date of Birth:	
State/Country of Birth:	
Social Security #:	
Religion:	
Heritage/Race:	
Education:	
Height:	
Weight:	
Hair Color:	
Eye Color:	
Skin Color:	

Child:

Full Name as Shown on Birth Certificate:	
Address:	
Date of Birth:	
Place of Birth (City, State):	
Social Security #:	
Religion:	
Is Natural Father named on birth certificate?	
Is child currently in foster care or placement?	

Is child living with adoptive parent(s)?	
If so, since when?	
How did adoptive parent(s) acquire the child?	
Is child an Indian Child?	
Has child been previously adopted?	
Child's Name Post-Adoption:	

Miscellaneous:

Names, Dates of Birth, & Social Security Numbers of all others living in household:	
Is the Natural Father likely to consent to the adoption?	
Is the Natural Mother likely to consent to the adoption?	
Is there a pending custody proceeding regarding the child? If so, list the court and docket number:	
Please detail any special circumstances you think make the adoption in the best interests of the child:	

Notes:

- Please call or e-mail attorney if you have any questions about this form or the other items will be requested to provide.
- Please print off one copy of Form OCFS-3937 for every member of household over age 18 and fill out completely and return to attorney. Form is located on attorney's website.
- Please print off Child Medical History Form, fill out, and have it signed by child's pediatrician, and return form to attorney. Form is located on attorney's website
- All members of household over age 18 will need to be fingerprinted.
- Please provide originals or certified (raised seal) copies of:
  - Child's Birth Certificate
  - Affidavit Acknowledging Paternity (if natural parents were not married at time of child's birth)
  - Adoptive Parent's Marriage Certificate, if married
  - Divorce Decrees for all prior divorces of adoptive parent(s)
  - Death Certificates for all prior deceased spouses of adoptive parent(s)