



## STANISLAUS COUNTY SUPERIOR COURT

[www.stanislaus.courts.ca.gov](http://www.stanislaus.courts.ca.gov)

1100 I Street  
PO Box 1098  
Modesto, CA 95354  
(209) 530-3100

Revised 4/25

## INDEPENDENT ADOPTION PACKET

This packet contains forms required to file for Independent Adoption in Stanislaus County Superior Court.

Additional Judicial Council forms, local forms and information are available in the Clerk's Office, the Court's Self-Help Center, or the Stanislaus County Law Library located at 1101 13<sup>th</sup> Street, Modesto, and on the following websites:

- ❖ Stanislaus County Superior Court: [www.stanislaus.courts.ca.us](http://www.stanislaus.courts.ca.us)
- ❖ Judicial Council's Self Help: [www.courts.ca.gov/selfhelp.htm](http://www.courts.ca.gov/selfhelp.htm)
- ❖ Judicial Council Forms: [www.courts.ca.gov/formsrules.htm](http://www.courts.ca.gov/formsrules.htm)

### **Superior Court Self-Help Center/Family Law Facilitator's Office**

800 11th Street, Room 220, Modesto

### **PROVIDING ASSISTANCE TO PARTIES REPRESENTING THEMSELVES**

Persons handling their own case (self-represented) are required to prepare and present their pleadings (court documents) in complete and proper form without help from the court staff. **This office is prohibited from giving legal advice in any manner.** Doing so would constitute acting as an attorney or legal counsel. Questions on legal matters regarding the appropriate form or its proper completion and presentation should be referred to an attorney.

### **PREPARATION**

You are required to bring in an original plus two (2) copies of all documents. The clerk will only conform two copies. You may need to make additional copies later depending on how many people need to be served.

Whether typed or hand printed, your documents must be completed in blue or black ink, be legible and dark enough to photocopy. Pleadings are to be dated and signed before being presented for filing. Forms must have the following court name and location in the heading:

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS  
1100 I Street, PO Box 1098  
Modesto, CA 95354

PLEASE NOTE THAT ALL ADOPTION CASES ARE KEPT CONFIDENTIAL AND CAN ONLY BE VIEWED BY THE PETITIONING PARTY OR THEIR ATTORNEY OF RECORD. ANY OTHER PARTY REQUESTING ACCESS WOULD REQUIRE AN ORDER FROM THE COURT. PETITIONER WILL BE REQUIRED TO SHOW A PICTURE I.D TO DISCUSS YOUR ADOPTION CASE.

**IMPORTANT NOTE: If you are adopting a child with a possible Indian Ancestry, there are additional forms you may need to complete and file.**

### **STEP 1: DETERMINE WHICH PAPERWORK YOU WILL NEED TO FILE**

To complete an Independent adoption, it must first be determined which forms will be needed. If both birth parents are willing to **consent to adoption**, then you will need to only file for Adoption. If this applies to you, skip to **Step 7**.

If either one or both of the birth parents is **not willing to consent** then you will need to file a termination of parental rights case and an adoption case at the same time. If this applies to you, **begin Step 2**.

### **STEP 2: PREPARING FORMS FOR TERMINATION OF PARENTAL RIGHTS AND ADOPTION**

Complete the following forms:

- ❖ Petition to Declare Minor Free from Parental Custody and Control (pleading form)
- ❖ Citation to Parent (pleading form)
- ❖ Judgment to Declare Minor Free From Parental Custody And Control (pleading form)
- ❖ Adoption Request (ADOPT-200)
  - With Indian Child Inquiry Attachment ICWA-010 (A) and
  - Parental Notification of Indian Status (ICWA-020)

### **STEP 3: FILING THE FORMS**

- ❖ Make 2 copies of all completed forms listed above.
- ❖ Present the forms to the filing clerk with your filing fee.
  - There is a \$20 filing fee for the adoption unless you qualify for a fee waiver.
- ❖ The clerk will issue you a hearing date on the citation for the termination of parental rights case and only open the adoption case.

### **STEP 4: SERVING THE DOCUMENTS**

- ❖ The biological parents must be personally served with a copy of the petition and a copy of the citation after they are filed with the court. You do not need to serve the Adoption request.
  - The person serving your documents **MUST** be someone other than you, not a party to the case and over the age of 18.

### **STEP 5: FILING THE PROOF OF SERVICE**

- ❖ Have the person who served the other party complete, date and sign proof of service (FL-330).
- ❖ After service, attach the proof of service to your original citation and file citation in the clerk's office.

### **STEP 6: ATTEND THE TERMINATION OF PARENTAL RIGHTS HEARING**

- ❖ If the parent whose rights are being terminated objects; another hearing or court trial may be set for all parties to give testimony and present evidence in support of their position. The Judge may refer the case to a Court Appointed Evaluator for a 7851 report.

- The court has the discretion to order you to pay for an evaluation up to a maximum of \$750.00, unless you qualify for a fee waiver.
- ❖ If the parent whose rights are being terminated does not object, then the Judge may make a final order the day of the hearing.
- ❖ Once a final order is made, the adoption is then referred to the appointed social worker to do a back ground investigation of the adoption parent. The social worker then prepares a recommendation and report that is filed with the court.
- ❖ On receipt of a recommendation and report for adoption, you must complete the following forms and take them to the clerk's office to receive an adoption hearing.
  - Request To Set Default or Uncontested Matter For Hearing (G002)
  - Adoption Order (ADOPT-215)
  - Adoption Agreement (ADOPT-210)
  - Court Report of Adoption (VS-44)
- ❖ Adoption hearings are informal confidential hearing. You may invite a minimal number of family members or friends to witness the event.
- ❖ Once the adoption is signed by the Judge the clerk will forward to the California Vital Records. Vital Records will mail you a new birth certificate.

#### **STEP 7: PREPARING FORMS FOR ADOPTION ONLY**

- ❖ Adoption Request (ADOPT-200)
  - With Indian Child Inquiry Attachment ICWA-010 (A) and
  - Parental Notification of Indian Status (ICWA-020)
  - You may submit a copy of the Independent Adoption Placement Agreement, an agreement of the parents' waiving termination of parental rights and/or consent of biological parents.

#### **STEP 8: FILING THE FORMS FOR ADOPTION ONLY**

- ❖ Take the forms to the clerk's office to file
- ❖ There is a \$20 filing fee for the adoption unless you qualify for a fee waiver.
- ❖ You will not receive an adoption hearing until the court receives a report with a recommendation from the social worker.
- ❖ YOU DO NOT NEED TO SERVE ADOPTION FORMS TO THE BIOLOGICAL PARENTS.
- ❖ A social worker will be appointed to write and file a report.
  - There will be a fee of \$4,500 due to the Department of Social Services unless you qualify for a waiver or reduction of this fee. You will need to contact them directly to obtain the criteria for this fee waiver.

#### **STEP 9: ADOPTION HEARING**

- ❖ On receipt of a recommendation and report for adoption, you must complete the following forms and take them to the clerk's office to receive an adoption hearing.
  - Request To Set Default or Uncontested Matter For Hearing (G002)
  - Adoption Order (ADOPT-215)
  - Adoption Agreement (ADOPT-210)
  - Court Report of Adoption (VS-44)
- ❖ Adoption hearings are informal confidential hearing. You may invite a minimal number of family members or friends to witness the event.
- ❖ Once the adoption is signed by the Judge the clerk will forward to the California Vital Records. Vital Records will mail you a new birth certificate.

## **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](https://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](https://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 services provider (ASP).

The ASP is an individual or an adoption agency personnel licensed and certified by the State of California. The role of this person is to explain to the birth parent their rights in the adoption process (before “placing” the child with you), and will 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](https://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](https://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

<input type="checkbox"/> ADOPT-203	<i>Stepparent Adoption Request</i>	This tells the judge about you and the child you are adopting.
<input type="checkbox"/> ADOPT-210	<i>Adoption Agreement</i>	This tells the judge that you and the child, if over 12, agree to the adoption. Fill it out, but do not sign it until the judge asks you to sign it.
<input type="checkbox"/> ADOPT-215	<i>Adoption Order</i>	The judge signs this form if your adoption is approved.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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

<input type="checkbox"/> 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.
---	--	--

- OR -

<input type="checkbox"/> 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](https://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**

<input type="checkbox"/> ADOPT-200	<i>Adoption Request</i>	This tells the judge about you and the child you are adopting.
<input type="checkbox"/> ADOPT-210	<i>Adoption Agreement</i>	This tells the judge that you and the child, if over 12, agree to the adoption. Fill it out, but do not sign it until the judge asks you to sign it.
<input type="checkbox"/> ADOPT-215	<i>Adoption Order</i>	The judge signs this form if your adoption is approved.
<input type="checkbox"/> ADOPT-230	<i>Adoption Expenses</i>	This lets the judge know what payments were made that relate to the child you are adopting.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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 over 12, 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 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. [USC 25, Chpt.21, Section 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 over the age of 12.

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.

# Yes, I need an Interpreter!

Sí, necesito un Intérprete!

Name (Nombre): \_\_\_\_\_

Case Number (Número de caso): \_\_\_\_\_

Language/Dialect Spoken (Que idioma/dialecto habla):

☐ Spanish (Español)      Dialecto: \_\_\_\_\_

☐ Other: \_\_\_\_\_      Dialect: \_\_\_\_\_

## Person requesting an Interpreter is:

Persona que solicita el intérprete es:

☐ Petitioner (Solicitante)

☐ Respondent (Demandado)

☐ Protected Person (Persona Protegida)

☐ Restrained Person (Persona Restringida)

☐ Other (Otro): \_\_\_\_\_



JENNIFER TROIA  
DIRECTOR

CALIFORNIA HEALTH & HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
OAKLAND REGIONAL ADOPTIONS OFFICE  
1515 Clay Street, Suite 1204  
Oakland, CA 94612  
510-622-2650



GAVIN NEWSOM  
GOVERNOR

### **Independent Adoptions**

The California Department of Social Services' (CDSS) Oakland Regional Office investigates independent adoptions in the following counties: Contra Costa, Marin, Mendocino, Monterey, Napa, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma and Stanislaus.

#### **To start the process:**

- Fill out ADOPT-200 form <http://courts.ca.gov/documents/adopt200.pdf>
- Attach your letters of guardianship if you are the legal guardian, or Independent Adoption Placement Agreement forms (if applicable), to the ADOPT 200
- Make 3 copies and file the form with the county court clerk
- The court keeps one copy, keep one for your files, and send one copy to our office
- Send in a check payable to CDSS for 50% of the fee of \$4500 (which is \$2250) or submit a fee reduction request form (see below)
- An Adoptions Specialist will be assigned to your case
- We will send the questionnaires and forms necessary for the adoption
- The adoption investigation process takes six months to a year, or longer, depending on case circumstances. The Adoptions Specialist will conduct a minimum of two home visits.
- Please be advised that birth parents will need to sign consent, a placement agreement, or their rights may need to be terminated by the court in order to complete the adoption.

#### **Fee reduction request form and information about the fee:**

- The general fee is \$4500. The fee with a recently approved pre-placement evaluation or adoption homestudy is \$1550.
- The fee can be reduced based on income. Please contact a CDSS Regional Adoptions Office for a form.

You can find more information about independent adoptions with CDSS here:  
<https://www.cdss.ca.gov/inforesources/adoptions>

**Feel free to call with any questions!**  
**(510)622-2650**

Name, Address & Telephone Number

*In Propria Persona*

**STANISLAUS COUNTY SUPERIOR COURT, STATE OF CALIFORNIA**

In re the Matter of the Petition of

Case No.:

\_\_\_\_\_  
[Petitioner's Name]

**PETITION TO DECLARE MINOR  
FREE FROM PARENTAL CUSTODY  
AND CONTROL**

to declare \_\_\_\_\_, a minor  
[Child's Name]

to be free from the custody and control of

Date:  
Time:  
Dept.:

\_\_\_\_\_  
[Name(s)]

Petitioner respectfully represents:

**1. Information about the Petitioner(s):**

Petitioner(s) is/are the: *(check one)*

- ☐ Step-Parent or the Domestic Partner of a Parent      ☐ Maternal Aunt/Uncle  
☐ Paternal Aunt/Uncle      ☐ Maternal Grandparent      ☐ Paternal grandparent  
☐ Other Relative Caregiver *(specify)*: \_\_\_\_\_ of the minor child

\_\_\_\_\_ and desires to adopt him/her on termination of  
his/her parent(s) rights to custody and control.

**2. Information about the Child:**

\_\_\_\_\_ is an unmarried minor child who was born on  
\_\_\_\_\_, and is a resident of \_\_\_\_\_, Stanislaus County,  
California.

1 **3. Information about the Parents:**

2 [EITHER]

3 [ ] The names of the minor's parents are \_\_\_\_\_ and

4 [OR]

5 [ ] The sole living parent of the child is \_\_\_\_\_, who resides at

6 [OR]

7 [ ] \_\_\_\_\_ is the parent who has custody of the child and resides  
8 at \_\_\_\_\_.

9 [ ] \_\_\_\_\_ the child's other parent resides at

10 [OR]

11 [ ] The whereabouts of the child's parent(s), \_\_\_\_\_,  
12 is/are unknown.

13 [OR]

14 [ ] The father and mother of the child are \_\_\_\_\_ and  
15 \_\_\_\_\_, respectively, and reside at \_\_\_\_\_

16 **4. Grounds for the Petition:**

17 Petitioner requests a judgment declaring the child(ren) free from the custody and control  
18 of \_\_\_\_\_ pursuant to Family Code §:

19 [EITHER]

20 ☐ Abandonment - FCS § 7822

21 ☐ The child has been left by both parents or the sole parent in the care and  
22 custody of another person for a **period of six months** without any provision for  
23 the child's support, or without communication from the parent or parents, with the  
24 intent on the part of the parent or parents to abandon the child.

25 [OR]

☐ One parent has left the child in the care and custody of the other parent for a **period of one year** without any provision for the child's support, or without communication from the parent, with the intent on the part of the parent to abandon the child

[OR]

☐ Parent(s) Convicted of a Felony - FCS § 7825

The child is one whose parent or parents is/are convicted of a felony and the facts of the crime of which the parent or parents were convicted are of such a nature as to prove the unfitness of the parents to have the future custody and control of the child.

WHEREFORE, petitioner prays judgment as follows:

1. For an order declaring that the minor child \_\_\_\_\_ is free from the custody and control of \_\_\_\_\_ and terminating all of his/her rights and responsibilities with regard to the child;

2. For an order appointing \_\_\_\_\_ to act under the provisions of Family code Section 7893, as guardian(s) of the minor child; and

3. For such other and further relief as the court may deem proper.

Dated: \_\_\_\_\_

Print Name: \_\_\_\_\_

Dated: \_\_\_\_\_

Print Name: \_\_\_\_\_

**VERIFICATION**

I/We, \_\_\_\_\_, am/are the petitioner(s) in this matter. I/We have read the foregoing Petition and know the contents thereof. The same is true of my own knowledge, except as to those matters which are therein represented on information and belief, and as to those matters which are therein represented on information and belief, and as to those matters, I/We believe to be true.

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

Dated: \_\_\_\_\_

Print Name: \_\_\_\_\_

Dated: \_\_\_\_\_

Print Name: \_\_\_\_\_

**CONSENT OF NATURAL PARENT**

*(Only applicable in Step-Parent Adoption)*

I, \_\_\_\_\_, am the natural mother/father of \_\_\_\_\_, the minor subject to this proceeding and the spouse of the Petitioner, \_\_\_\_\_. I hereby consent to the request to terminate the parental rights to custody and control of the minor by the natural mother/father, \_\_\_\_\_, and to the adoption request by the Petitioner.

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

Dated: \_\_\_\_\_

Print name: \_\_\_\_\_

1 *Name, Address & Telephone Number*

2  
3  
4 *In Propria Persona*

5  
6  
7  
8 **STANISLAUS COUNTY SUPERIOR COURT, STATE OF CALIFORNIA**

9  
10 In re the Matter of the Petition of

Case No.:

11 **CITATION TO PARENT**

12 [Adopting Parent(s)]

13 to declare \_\_\_\_\_, a minor

[Child's Name]

Date:

Time:

Dept.:

14 to be free from the custody and control of

15  
16 [Name(s)]

THE PEOPLE OF THE STATE OF CALIFORNIA

17 TO: \_\_\_\_\_ (Biological Parent Name)

18 By order of this court you are hereby advised that you may appear before the judge  
19 presiding in Department \_\_\_\_ of this court on \_\_\_\_\_, 20\_\_, at 8:30 a.m. then and  
20 there to show cause, if any you have, why \_\_\_\_\_ (Child's Name) should  
21 not be declared free from your custody and control according to the petition filed with this  
22 Citation for the purpose of freeing said child for adoption. The following information concerns  
23 rights and procedures that relate to this proceeding for the termination of custody and control of  
24 said minor as set forth in Family Code Section 7860 et seq.:

25 1. At the beginning of the proceeding the court will consider whether of not the interests  
of the minor child require the appointment of counsel. If the court finds that the interests of the



1 minor do require such protection, the court will appointment counsel to represent him/her,  
2 whether or not he/she is able to afford counsel. The minor will not be present in court unless he  
3 requests or the court so orders.

4 2. If a parent of the minor appears without counsel and is unable to afford counsel, the  
5 court must appoint counsel for the parent, unless the parent knowingly and intelligently waives  
6 the right to be represented by counsel. The court will not appoint the same counsel to represent  
7 both the minor and his parent.

8 3. The court may appoint either the public defender or private counsel. If private counsel  
9 is appointed, he or she will receive a reasonable sum for compensation and expenses, the amount  
10 of which will be determined by the court. That amount must be paid by the real parties in  
11 interest, but not by the minor, in such proportions as the court believes to be just. If, however, the  
12 court finds that any of the real parties in interest cannot afford counsel, the amount will be paid  
13 by the county.

14 4. The court may continue the proceeding for not more than thirty (30) days as necessary  
15 to appoint counsel to become acquainted with the case.

16 Date:

\_\_\_\_\_, Clerk

17 By: \_\_\_\_\_

18 Deputy Clerk

1 *Name, Address & Telephone Number*

2  
3  
4 *In Propria Persona*

5  
6  
7  
8 **STANISLAUS COUNTY SUPERIOR COURT, STATE OF CALIFORNIA**

9  
10 In re the Matter of the Petition of

CASE NO.

11 \_\_\_\_\_  
[Adopting Parent(s)]

JUDGMENT TO DECLARE MINOR  
FREE FROM PARENTAL CUSTODY  
AND CONTROL

12 to declare \_\_\_\_\_, a minor  
[Child's Name]

13 to be free from the custody and control of

14 \_\_\_\_\_  
[Name(s)]

15  
16 The petition of \_\_\_\_\_, for a judgment declaring

17 \_\_\_\_\_, a minor, free from the custody and control of

18 \_\_\_\_\_, came on regularly for hearing on

19 \_\_\_\_\_, 20 \_\_, petitioner appearing in Pro Per. The court having examined

20 petitioner, \_\_\_\_\_ and other witnesses, and other evidence both

21 oral and documentary having been introduced, and good cause appearing therefore, the court

22 finds:

23 1. Notice of the hearing on the petition was given by citation to

24 \_\_\_\_\_, as prescribed by Family code Section 7881;

25  
JUDGMENT TO DECLARE MINOR FREE  
FROM PARENTAL CUSTODY AND CONTROL

1           2. The Court Investigator of Stanislaus County Superior Court, California, has filed a  
2 written report of his/her investigation of the circumstances of the child as required by Family  
3 Code Section 7851, in which he/she recommends the \_\_\_\_\_  
4 be declared free from the custody and control of \_\_\_\_\_.  
5 Further, \_\_\_\_\_ has executed a consent to the Step-  
6 Parent Adoption by \_\_\_\_\_.

7           3. There is clear convincing evidence that \_\_\_\_\_ should be  
8 declared free from the custody and control of his/her parent(s), \_\_\_\_\_  
9 \_\_\_\_\_, pursuant to Family Code Section 7820 et seq.

10           4. The child is adoptable.

11           5. It is in the best interests of the child that he be declared free from the custody and  
12 control of his/her biological parent(s), \_\_\_\_\_,  
13 and there is no less detrimental alternative to provide for the child's best interests.

14           WHEREFORE IT IS ORDERED that the child, \_\_\_\_\_ is  
15 freed from the custody and control of \_\_\_\_\_, and that  
16 \_\_\_\_\_ is hereby appointed guardian of the child.

17 Dated:

18 \_\_\_\_\_  
19 Judge of Superior Court  
20  
21  
22  
23  
24  
25

**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.

Fill in court name and street address:

**Superior Court of California, County of**  
STANISLAUS  
1100 I STREET  
P.O. BOX 1098  
MODESTO, CA 95354

Court fills in case number when form is filed.

**Case Number:****1 Adopting parent(s)**

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

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

**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: \_\_\_\_\_

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

**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: \_\_\_\_\_

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

**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.

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

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. 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.

3. This inquiry (*check one*):

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

☐ gave me no reason to believe the child is or may be an Indian child.

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 eligible for membership 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 of or eligible for membership in a tribe.

Name of tribe(s):

Location of tribe(s):

b. ☐ The child's parents, grandparents, or great-grandparents are or were members 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):

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)

## INDIAN CHILD INQUIRY ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY: _____ STATE BAR NUMBER: _____ NAME: _____ FIRM NAME: _____ STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____ TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> STREET ADDRESS: 1100 I STREET MAILING ADDRESS: P.O. BOX 1098 CITY AND ZIP CODE: MODESTO, CA 95354 BRANCH NAME: _____	
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 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 of, or eligible for membership 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 of, or eligible for membership in, a federally recognized Indian tribe.  
 Name of tribe(s) (name each): \_\_\_\_\_  
 Location of tribe(s): \_\_\_\_\_
- c. ☐ One or more of my parents, grandparents, or other lineal ancestors is or was a member 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 on a reservation, rancheria, Alaska Native village, or other tribal trust land.
- e. ☐ The child is a resident of or is domiciled on a reservation, rancheria, Alaska Native village, or other tribal trust land.
- f. ☐ The child is or has been a ward of a tribal court.
- 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. Further inquiry may be required by the Indian Child Welfare Act.**

# 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**  
STANISLAUS  
1100 I STREET  
P.O. BOX 1098  
MODESTO, CA 95354

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:

- a. Be adopted and treated as my legal child (Fam. Code § 8612(b)) and
- b. 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



Case Number:

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: \_\_\_\_\_

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

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

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**

STANISLAUS  
1100 I STREET  
P.O. BOX 1098  
MODESTO, CA 95354

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: \_\_\_\_\_

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

- 4 ☐ 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*):
- ☐ Is 12 or older and agrees to the adoption
  - ☐ Is under 12
  - ☐ 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:
- 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.
  - Each adopting parent:
    - Is at least 10 years older than the child or meets the criteria in Family Code section 8601(b);
    - Will treat the child as their own;
    - Will support and care for the child;
    - Has a suitable home for the child; *and*
    - 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.

Case Number:

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



ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, ADDRESS, PHONE)	
Attorney for: IN PRO PER	
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS</b> Street Address: 800 11th Street, Modesto, CA 95354 Civil Clerk' Office: 1100 I Street, P.O. Box 1098, Modesto, CA 95353	
Petitioner/Plaintiff: Respondent/Defendant:	
<b>REQUEST TO SET DEFAULT OR UNCONTESTED MATTER FOR HEARING</b>	Case No.:

This proceeding is set for hearing on \_\_\_\_\_, at the hour of \_\_\_\_\_ a.m./p.m. in  
Department\_\_\_\_\_.

**Nature of Proceeding:**

\_\_\_ Default: \_\_\_ Civil

\_\_\_ Default: \_\_\_ Dissolution\*\* \_\_\_ Nullity\*\* \_\_\_ Legal Separation\*\* \_\_\_ Paternity\*\*

\_\_\_ Uncontested: \_\_\_ Dissolution \_\_\_ Nullity \_\_\_ Legal Separation \_\_\_ Paternity

**\*\*IMPORTANT NOTE: Family law default cases must follow the instructions on the Checklist for Default Hearing included with this Request to Set Hearing.**

☐ Order to Show Cause

☐ Stepparent Adoption ☐ Adoption ☐ Minors Compromise

☐ Freedom from Parent Control

☐ Other: \_\_\_\_\_

Executive Officer/Clerk of the Court

Dated: \_\_\_\_\_

By: \_\_\_\_\_

Deputy

# COURT REPORT OF ADOPTION

NO ERASURES, WHITEOUTS, PHOTOCOPIES,  
OR ALTERATIONS

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

TYPE OR PRINT CLEARLY IN BLACK INK ONLY

## PART I

The information provided in this section must be the information as it was at birth. Without this data, it may be impossible to prepare a new Certificate of Birth.

FACTS OF BIRTH	1A. NAME OF CHILD—FIRST		1B. MIDDLE		1C. LAST (BIRTH)		
	2. SEX	3. DATE OF BIRTH—MM/DD/CCYY	4. NAME OF PHYSICIAN (OR ATTENDANT, CERTIFIER, OR OTHER PERSON WHO ATTENDED THIS BIRTH)				
	5A. PLACE OF BIRTH—NAME OF HOSPITAL OR FACILITY		5B. CITY		5C. STATE OR COUNTRY		
PARENTS' DATA	6A. FULL NAME OF PARENT—FIRST		6B. MIDDLE		6C. LAST (BIRTH)		6D. RELATIONSHIP <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT
	7A. FULL NAME OF PARENT—FIRST		7B. MIDDLE		7C. LAST (BIRTH)		7D. RELATIONSHIP <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT

## PART II

Adoptive parents must furnish personal information about themselves as it was on the child's date of birth. This information is used to prepare the new Certificate of Birth.

PARENT INFORMATION	CHECK THE APPROPRIATE BOX: ADOPTIVE PARENT <input type="checkbox"/> BIOLOGICAL PARENT <input type="checkbox"/>						
	8A. NAME OF PARENT—FIRST		8B. MIDDLE		8C. LAST (BIRTH)		8D. RELATIONSHIP <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT
	9. STATE/FOREIGN COUNTRY OF BIRTH			10. DATE OF BIRTH—MM/DD/CCYY			
PARENT INFORMATION	CHECK THE APPROPRIATE BOX: ADOPTIVE PARENT <input type="checkbox"/> BIOLOGICAL PARENT <input type="checkbox"/>						
	11A. NAME OF PARENT—FIRST		11B. MIDDLE		11C. LAST (BIRTH)		11D. RELATIONSHIP <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT
	12. STATE/FOREIGN COUNTRY OF BIRTH			13. DATE OF BIRTH—MM/DD/CCYY			
14. PLEASE CHECK ONE I want the original birth certificate sealed, and a new birth certificate established. . . . . <input type="checkbox"/> Pursuant to Health and Safety Code Section 102640, I choose not to have a new birth certificate established. . . . . <input type="checkbox"/>							
15. Do you want the name of the hospital or other facility where birth occurred omitted from the new birth certificate as provided for in Section 102645 of the Health and Safety Code? (PLEASE CHECK ONE) YES <input type="checkbox"/> NO <input type="checkbox"/>							

VERIFICATION OF PART II	16. SIGNATURE OF PARENT VERIFYING DATA IN PART II ▶	17. MAILING ADDRESS OF PARENT VERIFYING DATA IN PART II
AGENCY OR DEPARTMENT	18A. NAME OF AGENCY OR DEPARTMENT	18B. MAILING ADDRESS OF AGENCY/DEPARTMENT THAT INVESTIGATED/HANDLED THE ADOPTION
ATTORNEY	19A. SIGNATURE AND PRINTED NAME OF ATTORNEY ▶	19B. MAILING ADDRESS OF ATTORNEY

## PART III

The court clerk must obtain as much information as is available to complete Parts I and II before completing Part III and forwarding the record and Court Order/Final Decree to the State Registrar as required by law.

COURT CLERK	20. I HEREBY CERTIFY THAT THE INDIVIDUAL DESCRIBED ABOVE WAS ADOPTED BY THE ABOVE NAMED ADOPTIVE PARENTS ON THE _____ DAY OF _____, 20_____, AS SET FORTH IN THE DECREE OF ADOPTION MADE ON THAT DATE IN CASE NUMBER _____			
	21A. NEW NAME AS SET FORTH IN THE DECREE OF ADOPTION—FIRST		21B. MIDDLE	21C. LAST
	22. SIGNATURE AND SEAL OF COURT CLERK ▶		BY:	
	23. CLERK IN AND FOR THE COUNTY OF:		24. DATE SIGNED—MM/DD/CCYY	25. DATE PETITION FOR ADOPTION FILED—MM/DD/CCYY
NAME AND MAILING ADDRESS OF PERSON TO WHOM CERTIFIED COPY IS TO BE SENT	NAME			
	ADDRESS—Street and Number		CITY, STATE, ZIP CODE	DAYTIME TELEPHONE NUMBER (     )

## GENERAL INFORMATION

The Court Clerk shall complete and transmit a court report of adoption to CDPH - Vital Records for each decree of adoption granted by any court in the State of California.

CDPH - Vital Records shall transmit court reports of adoptions for births that occurred in another state, the District of Columbia, any territory of the United States, or Canada to the appropriate registration authority.

The information contained in Part I and Part II of this certificate is required in order to identify and seal the original birth certificate and prepare a new birth certificate. Once the original birth certificate is sealed, it is only available upon order of a Superior Court.

## INSTRUCTIONS

The agency or department handling the adoption should fill out Parts I and II, but the Court Clerk may complete any incomplete items in Part I or Part II from the information furnished in the court record.

When requested by the adoptive parents, the CDPH - Vital Records shall **not** establish a new birth certificate for the child. (Health & Safety Code Section 102640.) The adoptive parents should indicate in Item 14 whether they DO want a new birth certificate established (by checking the "Yes" Box) or whether they DO NOT want a new birth certificate established (by checking the "No" Box).

The adoptive parents may request CDPH – Vital Records to omit the specific name and address of the hospital or other facility where the birth occurred by checking the "Yes" Box in Item 15. (Health & Safety Code Section 102645.)

A deceased spouse of an adopting single parent can be listed on the new birth certificate if both adopting parents were in the home at the time of the initial placement of the child for adoption. Refer to Health & Safety Code Section 102660 for additional requirements.

One of the adopting parents should verify the information in Part II, sign in Item 16, and enter his or her mailing address in Item 17. The name and address of the agency or department and the attorney handling the adoption should be entered in Items 18 and 19.

The applicable fee shall be paid to the Court Clerk at the time of filing the petition in an adoption proceeding for the services required by statute of the State Registrar. (Health & Safety Code Section 103730.)

For cases in which the petition for adoption was filed on or after January 1, 1972, and the individual was born in California or a foreign country, a certified copy of the new birth record will be furnished without additional fee as provided in Health & Safety Code Section 102710.

For adoptions that occurred prior to January 1, 1972, or in another state, a fee must be submitted for processing the new birth certificate, which includes one certified copy.

Additional certified copies may be obtained from CDPH – Vital Records, but there is an additional fee for each additional certified copy requested. Please contact CDPH – Vital Records for the current fees, or visit our website at [www.cdph.ca.gov](http://www.cdph.ca.gov). Please do not order additional copies until you have reviewed the original copy for accuracy. The mailing address for CDPH – Vital Records is:

California Department of Public Health – Vital Records  
MS 5103  
P.O. Box 997410  
Sacramento, CA 95899-7410