SUPERIOR COURT OF CALIFORNIA
COUNTY OF SOLANO

STEPPARENT ADOPTION PACKET

This packet provides basic information on how to adopt your stepchild. Because every family and every situation is different, you are encouraged to talk with a lawyer whenever you have questions about the adoption process. ***The court cannot give you legal advice.***

- **What is a stepparent adoption?**

A stepparent adoption is where a person adopts his or her spouse's or registered domestic partner's child. For example, if Jane and Maria are registered domestic partners and Jane wants to adopt Maria's child, Jane can file a stepparent adoption petition.

If you are not married to or in a registered domestic partnership with the child's legal parent, you cannot do a stepparent adoption. You might want to talk to a lawyer to see what other options you have.

- **What forms do I need to file to adopt my stepchild?**

The list of forms that you'll need to file is on pages 4 through 8.

- **How much does it cost to adopt my stepchild?**

It depends. First, there is a $20 court filing fee for each person being adopted. For example, if you want to adopt your spouse's three children, you would pay $60.00.

Second, there is the court investigation fee for the adoption, which is usually $500. If the child's other biological or legal parent does not consent to the adoption and you file a petition to terminate his or her parental rights, there will be an additional investigation by the court investigator. This additional investigation can cost anywhere from $200 to $400.

The court investigators office will tell you the exact cost of your investigation(s). Each investigation will not start until you have paid the investigation fee in full, so it is best to pay the fee as promptly as possible. The fee(s) may be paid to the Solano County Superior Court through the Family Law Clerk's Office, located on the 2nd floor of the Hall of Justice, 600 Union Avenue, Fairfield, CA 94533.

The filing fees and investigation costs are subject to change, so check with the court for the most current fees.

- **How long will the process take?**

The adoption process can be a long one, but how quickly it goes often depends on you. In general, the adoption can take place more quickly if:

(1) You promptly give your completed *Court Investigator's Information & Referral* form back to the Court Investigators Office;

(2) Once the Court Investigators Office tells you what paperwork they need, you provide the court investigator with all requested paperwork as soon as possible;

(3) You keep in touch with the Court Investigators Office on a regular basis.

- **I'm having trouble getting all the paperwork that the court investigator needs, or I can't find the other parent. What can I do?**

If you are having trouble finding paperwork or a person, it's important to tell the court investigator what's happening. The court realizes that there may be valid reasons for a delay.

If the court investigator does not hear from you 90 days after you were given the *Court Investigator's Information and Referral* form, or 180 days after the Court Investigators Office tells you what paperwork they need from you, your case will become "inactive." This means that your case will be put aside so that other cases can move ahead. It does not mean that your adoption petition is invalid or has been canceled. Once you provide all the necessary paperwork, your case will become "active" again.

- **What happens once I give all the paperwork to the Court Investigators Office?**

The court investigator will investigate your petition for adoption. This will include setting up an appointment to visit with you, your spouse or registered domestic partner, and the child(ren) to be adopted. This visit will take place in your home. The court investigator will then prepare a report and a recommendation and file it with the court. You will receive a copy of the report in the mail.

Once you receive the report, it is up to you to contact the court and schedule a hearing for the adoption. This hearing is important because it is where you will actually adopt the child(ren). ***The adoption process is not complete until you have the adoption hearing with the judge and the adoption order is filed with the court.*** Contact the Family Law Clerk's Office calendar clerk to schedule the hearing.

- **Does this process change if I have to terminate the other parent's parental rights?**

Yes. If the other parent does not consent to you adopting his or her children and you need to ask the court to terminate his or her parental rights, that investigation will take place first. The adoption investigation will only take place if the court grants your petition to terminate the other parent's parental rights.

You can read more information on terminating parental rights on page 9.

- **Who can I talk to if I need more help?**

You can speak with a private attorney at your own cost. There are several ways of finding a lawyer, such as asking your friends and family for recommendations or looking through the phone book. You can also call the Solano County Bar Association's Lawyer Referral Service at (707) 422-0127.

Bookstores and libraries usually have books on how to adopt children in California. You can also check with the Solano County Law Library, located on the third floor of the Hall of Justice building in Fairfield.

There are also many resources on the Internet, such as the adoption information website at http://www.courtinfo.ca.gov/selfhelp/family/adoption/.

Please remember that the court cannot give you legal advice.

FORMS AND DOCUMENTS NEEDED FOR A STEPPARENT ADOPTION

FORMS TO BE FILED WITH THE COURT AT THE BEGINNING OF YOUR CASE:

- ADOPT-200 "Adoption Request"
  - Fill out one for each child that you are adopting.
  - Attach the following forms to each Adoption Request form:
    - *Indian Child Inquiry Attachment* (Judicial Council form ICWA-010(A)).
  - If the child to be adopted is a Native American (Indian) child, attach an *Adoption of Indian Child* (Judicial Council form ADOPT-220) to the ADOPT-200 form.

FORMS NEEDED TO FINALIZE THE ADOPTION

- ADOPT-210 "Adoption Agreement"
  - This form tells the judge that you, and the child if he or she is age 12 or older, agree to the adoption. Fill this form out but do not sign it until the judge tells you.
- ADOPT-215 "Adoption Order"
  - The judge signs this form if your adoption is approved.

The ADOPT-210 and ADOPT-215 forms aren't needed until the end of your case. You can "lodge" these forms with the court at any time during the adoption proceeding, or you can hang on to them until the day of the adoption hearing. (To "lodge" a document means that the document is kept in the court file until needed, but is not "filed".)

FORMS TO BE GIVEN TO THE COURT INVESTIGATORS OFFICE:

(1) A completed Confidential Court Investigators Information and Referral Form.

(2) An original certified copy of each of the following documents:

a. Birth certificate for:

1. You;
2. Your spouse or registered domestic partner; and,
3. Each child to be adopted.

b. Marriage license and certificate from your current marriage OR documentation from the Secretary of State confirming your current registered domestic partnership.

c. The final judgment of dissolution of marriage or nullity of marriage for all prior marriages for you and for your spouse or registered domestic partner.

The Court Investigators Office requires actual certified copies of each document. Certified copies will usually have a colored ink stamp or an embossed seal on it. ***Photocopies of a certified document are not acceptable.*** If your document is in a foreign language, you must provide a certified copy of the English translation prepared by a certified interpreter. Informal translations by friends or relatives are not acceptable.

These certified documents will not be returned to you unless you specifically request it.

a. ***Where can I obtain these documents?***

Birth certificates and marriage certificates can be obtained from the vital records office (sometimes known as the recorder's office) in the county where the event took place, e.g. where the child was born or where the marriage license was issued.

Judgments of dissolution of marriage or of nullity of marriage can be obtained from the courthouse where the judgment was entered.

Documentation from the Secretary of State for a domestic partnership can obtained by submitting a form at:
http://www.sos.ca.gov/webcontact/dp/DPCertRequest.aspx

(3) Your spouse's or registered domestic partner's written consent for you to adopt his or her child(ren).

A blank copy of the form *Stepparent Adoption – Consent to Adoption by Parent Retaining Custody* (California Department of Social Services form number AD 2) is attached to this packet. Your spouse or registered domestic partner must sign this form in the presence of either the court investigator or the clerk of the court. Once your spouse or partner has signed the form, file it with the court and ask the clerk for an "endorsed filed" copy of the form. Bring this endorsed-filed form to the Court Investigators Office.

⚠ Bring extra copies of the consent form with you to the clerk's office to be "endorsed filed". Otherwise, the clerk of the court can make copies for you at the rate of 50 cents per side per page.

(4) The written consent of the parent giving up his or her parental rights, or a certified copy of a death certificate showing the parent is deceased.

If the child's other parent is deceased, you need to obtain an original certified copy of his or her death certificate. You can do this by going to the vital records office (sometimes known as the recorder's office) in the county where the parent died.

If the other parent is alive and is voluntarily giving up his or her parental rights, you may use one of three different forms to obtain that parent's consent to the adoption. Which form you use depends on your specific circumstances. Check each form to make sure you are using the right one.

If the other parent will not voluntarily give up his or her parental rights, you may need to consider other alternatives. More information about this is on page 9.

a. If the parent giving up parental rights lives in California...

Use form *Stepparent Adoption – Consent to Adoption by Parent in California Giving Custody to Husband or Wife or Domestic Partner of Other Parent* (California Department of Social Services form number AD 2A).

The parent signing the form must sign it in presence of a notary public, a clerk of the superior court in any county in the State of California, a probation officer, a qualified court investigator, or county welfare department staff member of any county. Family Code Section 9003.

Once the form has been signed, file the original with the court. Be sure to ask the clerk for an "endorsed filed" copy of the form. Bring this endorsed-filed copy to the Court Investigators Office.

Bring extra copies of the consent form with you to the clerk's office to be "endorsed filed". Otherwise, the clerk of the court can make copies for you at the rate of 50 cents per side per page.

b. If the parent giving up parental rights lives outside of California...

Use form *Stepparent Adoption – Consent to Adoption by Parent Outside California Giving Custody to Husband or Wife or Domestic Partner of Other Parent* (California Department of Social Services form number AD 2B).

This form must be signed in the presence of a notary public who is licensed in the state of that parent's residence. The form must also be properly notarized.

Once the form has been signed, file the original with the court and ask the clerk for an "endorsed filed" copy of the form. Bring this endorsed copy to the Court Investigators Office.

Bring extra copies of the consent form with you to the clerk's office to be "endorsed filed". Otherwise, the clerk of the court can make copies for you at the rate of 50 cents per side per page.

c. If the parent giving up parental rights lives outside of California and is in the military...

If the parent:

(1) Is in the military, and

(2) Is either

(a) Located outside of the United States, or

(b) Located in the United States but is (1) confined to base or post or (2) is otherwise unable to secure the services of a notary public within a reasonable time,

then you can use form *Stepparent Adoption – Consent to Adoption by Parent Outside California in Armed Forces Giving Custody to Husband or Wife or*

Domestic Partner of Other Parent (California Department of Social Services form number AD 2D) instead of the other forms (AD 2A or 2B).

This form must be signed in the presence of a military office who has the powers of a notary public and must be properly notarized by that officer.

Once the form has been signed, file the original with the court and ask the clerk for an "endorsed filed" copy of the form. Bring this endorsed-filed copy to the Court Investigators Office.

Bring extra copies of the consent form with you to the clerk's office to be "endorsed filed". Otherwise, the clerk of the court can make copies for you at the rate of 50 cents per side per page.

(5) If the child to be adopted is over the age of 12, the child's written consent to the adoption.

A copy of the consent form is attached. The child must sign the consent in the presence of a qualified court investigator or the clerk of the court.

Once the form has been signed, file the original with the court and ask the clerk for an "endorsed filed" copy of the form. Bring this endorsed-filed copy to the Court Investigators Office.

(6) Three (3) reference forms concerning you.

These forms are to be filled out by persons who are not related to you, your spouse, or your registered domestic partner. The completed forms need to be given back to the court investigator. The persons completing the forms may either give them back to you to give to the court investigator, or they may mail them directly to the court investigator at:

Court Investigators Office
Superior Court of California, County of Solano
2nd Floor, Hall of Justice
600 Union Avenue
Fairfield, CA 94533
(707) 207-7390

(7) Employment Verification of Military Personnel.

If you are employed, you must submit verification of your employment to the court investigator by submitting your LES with Military ID. If your employer does not have an in-house form that they use for such verifications, the employer should prepare a statement on company letterhead that includes:

a. Your position with the company;

b. How long you have been employed by the company;

c. Your salary; and,

d. The company's expectation of your continued employment.

You are expected to sign any releases that your employer may need to send this information to the Court Investigators Office.

Your employer may either give the statement back to you to give to the court investigator, or they may mail it directly to the court investigator at:

Court Investigators, Office
Superior Court of California, County of Solano
2nd Floor, Hall of Justice
600 Union Avenue
Fairfield, CA 94533
(707) 207-7390

(8) A *Request for Live Scan Service* form.

The live scan form is used to perform a criminal background check on you. ***You will not be given the form and the background check will not be done until all of the other documents described in items 1 through 7 have been given to the court investigator.***

When you are given the form, fill out only the third section/block with your personal information. Do not complete the rest of the form.

You will be given a list of agencies that perform live scans at the time you are given your live scan form.

After your fingerprints have been processed and electronically submitted to the Department of Justice, you are required to return the second copy of the *Request for Live Scan Service* form to the Court Investigators Office. This is your proof to the court investigator that your fingerprints have been processed. There is a minimal charge for this service that varies depending on the agency.

REMINDER!

The investigation for the adoption will not take place until you have given the court investigator all the documents listed in (1) through (8) and any additional paperwork you have been told to provide. It is <u>your</u> responsibility to make sure that the court investigator has everything he or she needs.

IF A PARENT WILL NOT CONSENT TO THE ADOPTION OF HIS OR HER CHILD

A petition for a stepparent adoption cannot go forward if you are not able to obtain the consent of the other parent. If this is the case for you, you might want to consult with an attorney to see what alternatives you have available to you. For example, a frequently used alternative is to file a petition asking that the child to be adopted be declared "free from parental custody and control" of the other parent. This is another way of asking the court to terminate (end) the other parent's parental rights. The reasons for terminating a parent's parental rights vary, and not all of them apply all of the time. Again, you might want to consult with an attorney to see what might work best for you. ***The court cannot give you legal advice.***

If you decide to file a petition to terminate a parent's rights, the court will require an investigation into whether it is in the child's best interests to terminate the parent's rights. The cost of the investigation depends on the child's age and circumstances. The Court Investigators Office will tell you how much the investigation cost will be. ***The investigation will not start until the fee is paid in full.*** The fee(s) may be paid to the Solano County Superior Court through the Family Law Clerk's Office, located on the 2nd floor of the Hall of Justice, 600 Union Avenue, Fairfield, CA 94533.

Once the fee is paid, the Court Investigators Office will tell you to set your case for hearing at least 60 days away. **It is your responsibility to set a hearing date with the calendar clerk in the Family Law Clerk's Office. Once you have your hearing date, you must notify the Court Investigators Office of that hearing date.** The investigator will then start the investigation and prepare his or her report for the court.

Once the court grants the petition and terminates the other parent's parental rights, the court investigator will start working on the adoption investigation **IF** you have submitted all the paperwork he or she needs.

ADOPTIONS AND THE INDIAN CHILD WELFARE ACT

A significant number of children in the United States have Native American ancestry, such as Sioux or Cherokee. To make sure that these children don't lose any rights they might have as Native Americans because they were adopted, federal and state law require adopting parents and the court to investigate whether a child might be a Native American (or Indian) child. This law is known as the Indian Child Welfare Act, or ICWA for short.

- **Will ICWA apply to my stepparent adoption?**

It might. ICWA will apply whenever a Native American child is being taken away from his or her parents or the Native American parent's parental rights are being terminated. This includes:

- Foster care "placements"
- Child Protective Services (CPS) removals
- Guardianships (both in juvenile court and probate court)
- Adoptions (both in juvenile court and family court)
- Certain juvenile delinquency cases

ICWA does not apply to cases where a custody dispute is just between the parents (e.g. a divorce or a paternity case).

- **What makes a child a Native American child?**

A child could be a Native American child if:

- The child is not married; and,
- The child is under the age of 18; and,
- The child is a member of a federally recognized Native American tribe **OR** the child is the biological child of a member of a federally recognized tribe **and** is eligible for tribal membership

- **How would I know if my stepchild has Native American ancestry?**

It's not always easy to know. You can ask the child if he or she knows about any relatives who might be Native American. You should ask the child's relatives if there is any Native American heritage in their family. If the child (or any member of his/her family) is receiving benefits from the federal government such as tribal housing or Indian health Services benefits, it is possible the child would qualify as an Indian child.

- **I don't know if my stepchild is Native American. Do I still have to fill out the ICWA-010(A)?**

Yes. This form is required for everyone, even those who don't know if the child is Native American or not.

- **The child I want to adopt is or might be Native American. What happens now with my adoption petition?**

The child's parents, any Indian custodian, any Native American tribe or tribes to which the child might belong, and the Bureau of Indian Affairs all have a right to know about your adoption petition. To make sure that they know about it, you or your attorney will need to fill out and complete the *Notice of Child Custody Proceeding for Indian Child* (ICWA-030). If you do not have an attorney the court will mail out the completed form as instructed on page 9. Instructions on how to fill out this form and mail it are on the *Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child* (Judicial Council form ICWA-005-INFO).

Once the notices are mailed, the court must wait at least 90 days to give the tribes (or the Bureau of Indian Affairs) a chance to respond. If the tribes do not respond after 90 days, the court can go forward with the adoption.

You will also need to send a *Parental Notification of Indian Status* (Judicial Council form ICWA-020) to the child's parents. The parents are to fill it out and give it back to you or to the court investigator.

Depending on your case, there may be additional requirements for adoption a Native American child. You may want to talk with an attorney about what else you need to do if your stepchild is or might be Native American. **The court cannot give you legal advice.**

- **What happens if I know or think that my stepchild is Native American and I don't tell anyone?**

The court takes ICWA very seriously. The court will require that an adopting parent take all necessary steps to make sure that everyone who needs to know about the adoption does know about it. This means that if the court learns that you deliberately did not tell anyone that the child was a Native American child or you concealed facts that would otherwise suggest that the child was an Indian child, you could be subject to court sanctions. Welfare & Institutions Code § 224.2(e).

Furthermore, a tribe that has a right to know about the adoption but wasn't told has the right to come in to court and undo the adoption at any time. *See* 25 U.S.C. §1914.

LIST OF FORMS IN THIS PACKET

Form Number	*Form Title*	*Last Revision Date*
ADOPT-050-INF	How to Adopt a Child in California	January 1, 2016
ADOPT-200	Adoption Request	January 1, 2016
ADOPT-210	Adoption Agreement	July 1, 2010
ADOPT-215	Adoption Order	July 1, 2010
ADOPT-220	Adoption of Indian Child	July 1, 2010
ICWA-005-INFO	Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child	July 1, 2012
ICWA-010(A)	Indian Child Inquiry Attachment	January 1, 2008
ICWA-020	Parental Notification of Indian Status	January 1, 2008
ICWA-030	Notice of Child Custody Proceeding for Indian Child	January 1, 2008
5000	Confidential Court Investigators Information and Referral	August 2008
5005	Reference for Stepparent Adoption	August 2008
5403	Consent of Child to be Adopted	August 2008
CDSS AD-2	Stepparent Adoption – Consent to Adoption by Parent Retaining Custody	June 2002
CDSS AD-2A/2B	Stepparent Adoption – Consent to Adoption by Parent in California Giving Custody to Husband or Wife or Domestic Partner of Other Parent	May 2011
CDSS AD-2D	Stepparent Adoption – Consent to Adoption by Parent Outside California in Armed Forces Giving Custody to Husband or Wife or Domestic Partner of Other Parent	March 2008
VS 44	Court Report of Adoption	January 2008

ADOPT-050-INFO How to Adopt a Child in California

General Information on Adoptions

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 California Court's Online Self-Help Center 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 cannot afford a lawyer: www.courts.ca.gov/selfhelp-adoption.htm. You can also get copies of adoption forms at your local court clerk's office.

In California there are several kinds of adoption. This form includes instructions for:

- Stepparent/domestic partner adoptions *(page 1)*
- Adoption of an Indian *(Native American)* child *(page 2)*
- Independent, agency, and international adoptions *(page 2)*
- Open adoptions *(page 2)*

Stepparent/Domestic Partner Adoptions

Answer these questions to get started.

- Was the adopting parent in a union with the birth parent at the time the child was born? *Check one* ☐ Yes ☐ No
  A "union" means a:
  - *Marriage;*
  - *California registered domestic partnership; or*
  - *Registered domestic partnership or civil union from out of state that is legally equivalent to a marriage.*
- Is the adopting parent still in a union with the birth parent? *Check one* ☐ Yes ☐ No
  (See the above explanation of a "union")

If you answered "No" to **either** question, complete items 1 through 4 below for a *Stepparent/Domestic Partner Adoption.*
If you answered "YES" to **both** questions, complete items 1 and 2, only, for a *Stepparent Adoption to Confirm Parentage.*

(1) Fill out court forms.

☐ ADOPT-200	*Adoption Request*	This tells the judge about you and the child you are adopting.
☐ ADOPT-210	*Adoption Agreement*	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	*Adoption Order*	The judge signs this form if your adoption is approved.
☐ ICWA-010(A)	*Indian Child Inquiry Attachment*	This lets the judge know that you have asked whether the child may have Indian ancestry.
☐ ICWA-020	*Parental Notification of Indian Status*	This proves that the child's parents have been asked about Indian ancestry.
☐ ADOPT-205 (or an equivalent declaration)	*Declaration Confirming Parentage in Stepparent Adoption*	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.

(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 filing fee. 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 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
☐ A camera, if you want a photo of you and your child with the judge *(optional)* ☐ Friends/relatives *(optional)*

Independent, Agency, or International Adoptions

If this is an independent, agency, or international adoption, fill out and file the forms listed in 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 parent(s) do not have to be terminated.

(1) Fill out court forms.

☐ ADOPT-200	*Adoption Request*	This tells the judge about you and the child you are adopting.
☐ ADOPT-210	*Adoption Agreement*	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	*Adoption Order*	The judge signs this form if your adoption is approved.
☐ ADOPT-230	*Adoption Expenses*	This lets the judge know what payments were made that relate to the child you are adopting.
☐ ICWA-010(A)	*Indian Child Inquiry Attachment*	This lets the judge know that you have asked whether the child may have Indian ancestry.
☐ ICWA-020	*Parental Notification of Indian Status*	This proves that the child's parents have been asked about Indian ancestry.

(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 filing fee. 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 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)* ☐ Friends/relatives *(optional)*

"Open" Adoption

If you want your child to have contact with his or her birth family, request an "open" adoption. Form ADOPT-310 describes the type of contact the birth family will have with your child. In addition to the forms listed in 1 on pages 1 and 2, fill out and bring to court Form ADOPT-310.

Adopting an Indian Child

In addition to the forms listed in (1) on pages 1 and 2, fill out and bring to court:

☐ Form ADOPT-220 *Adoption of Indian Child*
☐ Form ADOPT-225 *Parent of Indian Child Agrees to End Parental Rights*

If you are adopting through a tribal customary adoption:

☐ Attach a copy of the tribal customary adoption order to *Adoption Request,* ADOPT-200
☐ Attach a copy of the tribal customary adoption order to the *Adoption Order,* ADOPT-215

ADOPT-200 Adoption Request

Clerk stamps date here when form is filed.

If you are adopting more than one child, fill out an adoption request for each child.

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

a. _____

b. _____

Relationship to child: _____

Street address: _____

City: _____ State: ____ Zip: _____

Telephone number: _____

Lawyer *(if any): (Name, address, telephone numbers, e-mail address, and State Bar number):*

_____

_____

_____

Fill in court name and street address:

Superior Court of California, County of

Court fills in case number when form is filed.

Case Number:

(2) I/We filed this *Adoption Request* in this court because it is in the county *(check all that apply):*

- ☐ Where the adopting parent(s) reside;
- ☐ Where the child was born or resides at the time of filing;
- ☐ Where an office of the agency that placed the child for adoption is located;
- ☐ Where an office of the department or public adoption agency that is investigating the petition is located;
- ☐ Where a placing birth parent or parents resided when the adoptive placement agreement, consent, or relinquishment was signed;
- ☐ Where a placing birth parent or parents resided when the petition was filed;
- ☐ Where the child was freed for adoption.

(If the child is a dependent of the court, the Adoption Request *must be filed in the county where the child was freed for adoption or the county where the adopting parent(s) reside(s). See Fam. Code, § 8714.)*

(3) Type of adoption *(check one):*

- ☐ Agency *(name):* _____
  - ☐ Relative ☐ Nonrelative
- ☐ Joinder will be filed. ☐ Joinder is being filed at same time as this *Adoption Request.*
- ☐ Tribal customary adoption *(attach tribal customary adoption order)*
- ☐ Independent
  - ☐ Relative ☐ Nonrelative ☐ Additional Parent(s)
- ☐ Intercountry *(name of agency):*

  _____
  - ☐ This adoption may be subject to the Hague Adoption Convention (form ADOPT-216 *must be filed with this request).*

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

Hearing Date → Hearing is set for:

Date: _____

Time: _____

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.

Your name: _____ Case Number:

☐ Stepparent

☐ Stepparent adoption to confirm parentage. *(Select this option if you were married to or in a state-registered domestic partnership with the birth parent at the time the child was born and you remain in that union.)*

4 Information about the child:

a. The child's new name will be:

_____

b. ☐ Boy ☐ Girl

c. Date of birth: _____ Age: _____

d. Child's address *(if different from yours)*:

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 your physical care:

_____

5 Child's name before adoption *(Fill out ONLY if this is an independent, stepparent, or tribal customary adoption)*:

_____

6 Does the child have a legal guardian? ☐ Yes ☐ No

(If yes, attach a copy of the Letters of Guardianship and fill out below):

a. Date guardianship ordered: _____

b. County: _____

c. Case number: _____

7 Is the child a dependent of the court? ☐ Yes ☐ No

(If yes, fill out below):

Juvenile case number: _____

County: _____

8 Child may have Indian ancestry: ☐ Yes ☐ No

a. Whether you answered "Yes" or "No," you must fill out and attach *Indian Child Inquiry Attachment* (form ICWA-010(A)) and *Parental Notification of Indian Status* (form ICWA-020) or other proof that ICWA inquiry has been completed in accordance with rule 5.481(a).

b. If you answered "Yes," you must also fill out and attach *Adoption of Indian Child* (form ADOPT-220) if, after notice, it is determined that ICWA does apply to the child.

9 Names of birth parents, if known:

a. Mother: _____ b. Father: _____

10 **If this is an agency adoption:**

a. I/We 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 might be available. ☐ Yes ☐ No

b. All persons with parental rights agree that the child should be placed for adoption by the California Department of Social Services or a county adoption agency or a licensed adoption agency (Fam. Code, § 8700) and have signed a relinquishment form approved by the California Department of Social Services, and the time to revoke the relinquishment has expired or been waived.

☐ Yes ☐ No *(If no, list the name and relationship to child of each person who has not signed the relinquishment form or whose time to revoke the relinquishment has not expired or been waived)*:

_____

_____

c. 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. ☐ Yes ☐ No

d. This is an adoption conducted under the requirements of the Hague Adoption Convention and the child will be moving or has already moved with the adopting parent(s) to another Hague Convention member country at the conclusion of this adoption. ☐ Yes ☐ No If yes, child will be moving or has moved to *(name of country):* _____ and adopting parent(s): ☐ seek(s) a California adoption ☐ will be petitioning for a Hague Adoption Certificate ☐ will be seeking a Hague Custody Declaration.

(11) If this is an independent adoption:

a. A copy of the Independent Adoptive Placement Agreement from the California Department of Social Services is attached. (This is required in most independent adoptions; see Fam. Code, § 8802.) ☐ Yes ☐ No

b. 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. ☐ Yes ☐ No *(If no, list the name and relationship to child of each person who has not signed the agreement form):*

_____

c. I/We will file promptly with the department or delegated county adoption agency the information required by the department in the investigation of the proposed adoption. ☐ Yes ☐ No

d. ☐ This is an independent adoption involving additional parent(s): ☐ All persons with existing parental rights agree to this adoption and will maintain their existing parental rights. ☐ An agreement waiving termination of parental rights, signed by both the existing parent(s) and the adopting parent(s) is attached.

(12) If this is a stepparent adoption:

a. The birth parent *(name):* _____ ☐ has signed a consent ☐ will sign a consent

b. The birth parent *(name):* _____ ☐ has signed a consent ☐ will sign a consent

c. The adopting parents were married on or The domestic partnership was registered on *(date):* _____ *(For court use only. This does not affect social worker's recommendation. There is no waiting period.)*

d. ☐ I am seeking a stepparent adoption to confirm my parentage. At the time the child was born, I was married to or in a state-registered domestic partnership with the parent who gave birth and we remain in that union.

see attached ☐ Form ADOPT-205 or ☐ Declaration describing the circumstances of the child's conception

(13) ☐ The child was conceived by assisted reproduction in compliance with Family Code section 7613.

(14) Contact after adoption

Contact After Adoption Agreement (form ADOPT-310) ☐ is attached ☐ will not be used

☐ will be filed at least 30 days before the adoption hearing ☐ is undecided at this time.

☐ This is a tribal customary adoption. Postadoption contact is governed by the attached tribal customary adoption order.

(15) Consent for adoption is not necessary because *(complete all sections that apply to your adoption):*

a. ☐ The consent of the ☐ birth parent ☐ presumed father is not necessary because *(check the applicable reasons under Fam. Code, § 8606):*

(1) ☐ The parent has been judicially deprived of the custody and control of the child.

(2) ☐ The parent has voluntarily surrendered the right to custody and control of the child in a judicial proceeding in another jurisdiction, under a law of that jurisdiction providing for the surrender.

(3) ☐ The parent has deserted the child without providing information to identify the child.
(4) ☐ The parent has relinquished the child under Family Code section 8700.
(5) ☐ The parent has relinquished the child for adoption to a licensed or authorized child-placing agency in another jurisdiction.

b. ☐ A court ended the parental rights of:

Name: _____ Relationship to child: _____ on *(date):* _____
Name: _____ Relationship to child: _____ on *(date):* _____
(Enter the date of the court order ending parental rights and attach a copy of the order.)

c. ☐ The child is the subject of a tribal customary adoption order under Welfare and Institutions Code section 366.24, which has modified the parental rights of:

Name: _____ Relationship to child: _____ on *(date):* _____
Name: _____ Relationship to child: _____ on *(date):* _____
Name: _____ Relationship to child: _____ on *(date):* _____
(Attach a copy of the order.)

d. ☐ I/We will ask the court to end the parental rights of *(attach copy of* Petition to Terminate Parental Rights *or* Application for Freedom From Parental Custody, *if filed):*

Name: _____ Relationship to child: _____
Name: _____ Relationship to child: _____

e. ☐ Adopting parent has custody of the child by court order or by agreement with the other parent, and each of the following persons with parental rights has not contacted the child and has not paid for the child's care, support, and education for one year or more when able to do so. (Fam. Code, § 8604(b).)

Name: _____ Relationship to child: _____
Name: _____ Relationship to child: _____
Name: _____ Relationship to child: _____

f. ☐ The child has been abandoned as follows:

(1) ☐ The child has been left by the child's parent or parents with no way to identify the child.

(2) ☐ The child has been left in the custody of another person by both parents or the sole parent for six months without providing for the child's support, or without communication from the parent or parents, with the intent to abandon the child.

(3) ☐ One parent has left the child in the care and custody of the other parent for one year or longer without providing for the child's support or without communication from the parent, with the intent to abandon the child.

(If any of the above boxes were checked, adopting parent must also check item 15(d) and file an Application for Freedom from Parental Custody. *See Fam. Code, § 7822(a).)*

g. ☐ The consent of the presumed father is not required because he did not become a presumed father before the mother's relinquishment or consent became irrevocable or the mother's parental rights were terminated. (Fam. Code, § 8604(a).)

h. ☐ Each of the following persons with parental rights has died:
Name: _____ Relationship to child: _____
Name: _____ Relationship to child: _____

(16) **Suitability for adoption**
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 his or her own;
c. Will support and care for the child;
d. Has a suitable home for the child; *and*
e. Agrees to adopt the child.

(17) ☐ I/We ask the court to approve the adoption and to declare that the adopting 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.

☐ I/We ask the court to date its order approving the adoption as of an earlier date *(date):* _____ for the following reason (Fam. Code, § 8601.5):
_____
_____
_____
(Enter a date no earlier than the date parental rights were ended.)

☐ This is a tribal customary adoption. I/We ask the court to approve the adoption and to declare that the adopting 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.

(18) If a lawyer is representing you in this case, he or she must sign here:

Date: _____ _____ ▶ _____
Type or print lawyer's name *Signature of lawyer for adopting parent(s)*

(19) 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*

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. Or call Covered California at 1-800-300-1506 (English) or 1-800-300-0213 (Spanish).

Your name: _____ Case Number: _____

Declaration Confirming Parentage in Stepparent Adoption

☐ This form is attached to Form ADOPT-200, *Adoption Request.*

This optional form may be attached to the form ADOPT-200 if the adopting parent was married to or in a state-registered domestic partnership with the parent who gave birth to the child at the time the child was born. You may instead attach a declaration in another format containing substantially the same information. The birth parent and the adopting parent must complete separate declarations.

(1) I *(write your name)* _____ declare as follows:

(2) Relationship between the birth parent and the adopting parent seeking to confirm parentage *(check one):*

a. ☐ I am the parent who gave birth to the child to be adopted. I married or entered into a state-registered domestic partnership (including a domestic partnership or civil union from out-of-state that is legally equivalent to a marriage) with the adopting parent who is seeking to confirm parentage *(name of adopting parent seeking to confirm parentage)*

_____ and we remain in that union.

b. ☐ I am the adopting parent seeking to confirm parentage. I married or entered into a state-registered domestic partnership with the parent who gave birth *(name of parent who gave birth to the child to be adopted)* _____ _____ and we remain in that union.

(3) We were married/registered as domestic partners on *(date you entered into your earliest union)* _____, before our child was born. A copy of our marriage certificate, registered domestic partner certificate, or certificate of out-of-state domestic partnership or civil union is attached.

(4) Our child *(name of child to be adopted)* _____ was born on *(date)* _____. A copy of our child's birth certificate is attached.

(5) ☐ Our child was conceived through assisted reproduction in compliance with Family Code section 7613 as described below (*Describe how your child was conceived and whether you used a known or unknown donor. A letter from your sperm bank or a written donor agreement verifying conception by assisted reproduction should be attached. If you used a known donor without a sperm bank or written donor agreement, you should seek legal advice before submitting this form):*

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Your name: _____

Case Number:

6 ☐ *If there are any other persons who are or may be the child's parents, describe these persons' relationship to the child, including their names, the ways in which these persons act as a parent to the child, and whether these persons consent to the adoption:* _____

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 your name *Sign name*

ADOPT-210 Adoption Agreement

Clerk stamps date here when form is filed.

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

a. _____

b. _____

Relationship to child: _____

Address *(skip this if you have a lawyer):* _____

City: _____ State: _____ Zip: _____

Telephone number: _____

Lawyer *(if any): (Name, address, telephone numbers, e-mail address, and State Bar number):* _____

Fill in court name and street address:

Superior Court of California, County of

(2) Child's name before adoption: _____

Child's name after adoption: _____

Date of birth: _____ Age: _____

Court fills in case number when form is filed.

Case Number:

Signing this forms:

- *Adoptions usually require a hearing where most signatures on this form must be completed in front of a judge.*
- *Item 4(b) 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 during the union, usually no hearing is required and you may sign this form in front of a proper witness. See paragraph 8(a) 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 only one adopting parent, read and sign below.*

a. I am the adopting parent listed in (1), and I agree that the child will:

(1) Be adopted and treated as my legal child *(Fam. Code, § 8612(b)) and*

(2) 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*

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

Date: _____ _____ ▶ _____
Type or print your name *Signature of spouse or registered domestic partner (may be signed before hearing)*

(5) *If there are two adopting parents, read and sign below.* We are the adopting parents listed in (1), and we agree that the child will:

a. Be adopted and treated as our legal child *(Fam. Code, § 8612(b)) and*
b. 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 adoption of the child.

Date: _____ _____ ▶ _____
Type or print your name *Signature of adopting parent*

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

Date: _____ _____ ▶ _____
Type or print your name *Signature of adopting parent*

(6) *If this is a tribal customary adoption, read and sign below.* I/we are the adopting parents listed in (1), and I/we agree that the child will:

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

If two adopting parents, we agree to the other parent's adoption of the child.

Date: _____ _____ ▶ _____
Type or print your name *Signature of adopting parent*

Date: _____ _____ ▶ _____
Type or print your name *Signature of adopting parent*

(7) *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), and I agree to his or her adoption of my child.

Date: _____ _____ ▶ _____
Type or print your name *Signature of legal parent*

Your name: _____ Case Number: _____

(8) **Executed** *(check one):*

a. ☐ This form was signed outside of a hearing. *(Select this option only for a stepparent adoption involving a spouse or partner who gave birth to the child during the union, where the court did not order a hearing for good cause.)*

(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.)*

Date: _____

_____

Judge (or Judicial Officer)

ADOPT-215 Adoption Order

Clerk stamps date here when form is filed.

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

a. _____

b. _____

Relationship to child: _____

Street address: _____

City: _____ State: _____ Zip: _____

Daytime telephone number: _____

Lawyer *(if any): (Name, address, telephone number, e-mail address, and State Bar number)*: _____

Fill in court name and street address:

Superior Court of California, County of

(2) Child's name after adoption: _____

First name: _____

Middle name: _____

Last name: _____

Date of birth: _____ Age: _____

Place of birth *(if known)*: _____

City: _____ State: _____ Country: _____

Court fills in case number when form is filed.

Case Number:

(3) Name of adoption agency *(if any)*: _____

(4) **Hearing details**

Hearing date: _____ Dept.: _____ Div.: _____ Rm.: _____

Judicial Officer: _____ Clerk's office telephone number: _____

People present at the hearing:

☐ Adopting parent(s) ☐ Lawyer for adopting parent(s)

☐ Child ☐ Child's lawyer

☐ Parent keeping parental rights: _____

☐ Other people present *(list each name and relationship to child)*:

a. _____

b. _____

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.

☐ *The hearing is waived pursuant to Family Code section 9000.5 (Check this box only if this is an adoption confirming parentage of a stepparent who was married or in a state-registered domestic partnership with the parent who gave birth 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.

Your name: _____ Case Number: _____

(6) The judge has reviewed the report and other documents and evidence and finds that each adopting parent:

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

(7) ☐ This case is an adoption by a relative petitioned under Family Code section 8714.5.
☐ The adopting relative ☐ The child, who is 12 or older, has requested that the child's name before adoption be listed on this order. (Fam. Code, § 8714.5(g).)
The child's name before adoption was:
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 parents. The clerk will fill out (13) below.

(9) ☐ The judge approves the *Contact After Adoption Agreement* (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.

(12) ☐ This is an independent adoption involving an additional parent(s). ☐ All persons with existing parental rights agreed to this adoption and will maintain their existing parental rights. ☐ An agreement waiving termination of parental rights, signed by both the existing parent(s) and the adopting parent(s), 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* (ADOPT-200) ☐ *Adoption of Indian Child* (ADOPT-220)
☐ *Adoption Order* (ADOPT-215) ☐ *Contact After Adoption Agreement* (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-220 Adoption of Indian Child

Clerk stamps date here when form is filed.

☑ This form is attached to *Adoption Request* (ADOPT-200).

(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

Fill in case number if known:

Case Number:

Federal law says the state courts must send a copy of all adoption orders for an Indian child to the Secretary of the Interior within 30 days. The state court must also send the following information *Please complete the rest of the form.*

(2) Indian child's name: _____

Date of birth: _____ Age: _____

(3) Indian child's tribe (or tribe child is eligible for): _____

Enrollment #: _____ ☐ *Check here if you do not know.*

☐ *Check here if tribe does not have an enrollment number.*

(4) Indian child's biological mother *(name):* _____

Street address: _____

City: _____ State: _____ Zip: _____

☐ *Check here if you do not know.*

☐ The biological mother attaches her request that her identity remain confidential.

(5) Indian child's biological father *(name):* _____

Street address: _____

City: _____ State: _____ Zip: _____

☐ *Check here if you do not know.*

☐ The biological father attaches his request that his identity remain confidential.

Your name: _____ Case Number:

(6) Indian child's biological Indian grandmothers *(names; include maiden names if you know them):*

_____ _____

☐ *Check here if you do not know.*

(7) Indian child's biological Indian grandfathers *(names):*

_____ _____

☐ *Check here if you do not know.*

(8) Name of any agency with information about this adoption: _____

_____

_____

(9) Other people with information about the Indian child's ancestry:

	Name	Relationship to Child
a.	_____	_____
b.	_____	_____
c.	_____	_____

(10) Parental rights *(check all that apply):*

a. ☐ A court ended parental rights on *(date):* _____

b. ☐ Parental rights were modified under a tribal customary adoption order on *(date):* _____

c. ☐ Parents voluntarily agreed in writing to end their parental rights.

(1) ☐ ADOPT-225 will be recorded in front of a judge and filed with the court before the adoption hearing on *(date):* _____

(2) ☐ ADOPT-225 was recorded in front of a judge and is attached to ADOPT-200 *(Adoption Request).*

(3) ☐ ADOPT-225 was signed at least 10 days after the birth date of the Indian child.

d. ☐ A judge has certified that he or she fully explained the terms and consequences of the parents' agreement to end parental rights and that the parents understood.

(1) ☐ This certificate was filed with the court on *(date):* _____; OR

(2) ☐ This certificate is attached to ADOPT-200 or will be filed before the adoption hearing.

(11) *Note:* The court will notify the American Indian tribe of the child's adoption.

INFORMATION SHEET ON INDIAN CHILD INQUIRY ATTACHMENTS AND NOTICE OF CHILD CUSTODY PROCEEDING FOR INDIAN CHILD

This is an information sheet to help you fill out form ICWA-010(A), *Indian Child Inquiry Attachment* or, in a probate guardianship, page 5 of form GC-210(CA), *Guardianship Petition—Child Information Attachment*; and form ICWA-030, *Notice of Child Custody Proceeding for Indian Child.*

ICWA-010(A), *Indian Child Inquiry Attachment* or page 5 of form GC-210(CA), *Guardianship Petition—Child Information Attachment*

You are responsible for helping to find out if the child is or may be an Indian child and filling out the information requested on ICWA-010(A), *Indian Child Inquiry Attachment* or on page 5 of GC-210(CA), *Guardianship Petition—Child Information Attachment.* This is important because if the child is an Indian child, specific steps must be taken to prevent the breakup of the child's Indian family and to obtain for the child resources and services that are culturally specific to the child's family. The court will check to make sure that the child receives these resources and services.

Tips on how to fill out ICWA-010(A), *Indian Child Inquiry Attachment* or page 5 of GC-210(CA), *Guardianship Petition—Child Information Attachment*

1. Try to find contact information for the child's parents or other legal guardian, the child's Indian custodian (if the child is living with an Indian person other than a parent), and the child's grandparents and great-grandparents.
2. Contact the child's parents or other legal guardian, and the child's Indian custodian, and ask them (and the child, if he or she is old enough) these questions:
   a. Is the child a member of a tribe, and if they think he or she might be, then which tribe or tribes?
   b. Are they members of a tribe, and if they think they might be, which tribes?
   c. Does the child or the child's parents live in Indian country?
   d. Does the child or any of the child's relatives receive services or benefits from a tribe, and if yes, which tribe?
   e. Does the child or any of the child's relatives receive services or benefits available to Indians from the federal government?
3. If you are in touch with any of the child's relatives, ask them the same questions.

The court clerk's office cannot file your petition unless you have filled out and attached to the petition form ICWA-010(A), *Indian Child Inquiry Attachment.* This does not apply to a petition for appointment of a guardian in a probate guardianship or a petition filed in the juvenile court under Welfare and Institutions Code sections 601 or 602.

ICWA-030, *Notice of Child Custody Proceeding for Indian Child*

After taking the steps listed above to find out whether the child is an Indian child, if you know or have reason to know that the child is an Indian child, you must notify the tribe or tribes that may have a connection with the child about your court case. Tribes that learn of the case can investigate and advise you and the court whether the child is a tribal member or eligible to become a tribal member, and can then decide whether to get involved in the case or assume tribal jurisdiction. You give notice to the child's tribe or tribes and the other persons and the organization listed at the top of the second page of this form by sending them filled-out copies of ICWA-030, *Notice of Child Custody Proceeding for Indian Child* (the "Notice"), together with the other documents listed at the bottom of that page.

Some tips to help you figure out if you have a reason to know the child is an Indian child

1. If the child, an Indian tribe, an Indian organization, an attorney, a public or private agency, or a member of the child's extended family says or provides information to anyone involved in the case that the child is an Indian child;
2. If the child, the child's parents, or an Indian custodian live in a predominately Indian community; or
3. If 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.

These are just a few of the facts that would give you reason to know that a child is an Indian child. There also may be other information that would give you reason to know that the child is an Indian child.

Form Approved for Optional Use
Judicial Council of California
ICWA-005-INFO
[Rev. July 1, 2012]

www.courts.ca.gov

Who do you need to notify?

If you know or have reason to know that the child is an Indian child, you must send the Notice to the following:

1. Child's parents or other legal guardian, including adoptive parents;
2. Child's Indian custodian (if the child is living with an Indian person who has legal custody of the child under tribal law or custom, under state law, or if the parent asked that person to take care of the child);
3. Child's tribe or tribes; and
4. Sacramento Area Director, Bureau of Indian Affairs, Federal Office Building, 2800 Cottage Way, Sacramento, California 95825 (if the parents, Indian custodian, or tribe cannot be determined or located).

Tip on how to find the address for the child's tribe or tribes

The Secretary of the Interior periodically updates and publishes in the Federal Register (see 25 C.F.R. 23.12), a list of tribe names and addresses. The Bureau of Indian Affairs also keeps a list. You can link to the Federal Register list, another list of tribes maintained by the California Department of Social Services, and other resources related to ICWA, on the California Department of Social Services website at *http://www.childsworld.ca.gov/PG2070.htm.* The list of tribes maintained by the Department of Social Services is very helpful but it is not official, nor is there any authority to use the addresses in that list over different agents for service listed in the Federal Register. If the official list and the state's list differ on a tribal address, it is a good idea to send copies of the Notice and the other documents to both addresses.

Copy to the Secretary of the Interior and the Area Director of the Bureau of Indian Affairs

If you know the identity and location of the parent, Indian custodian, and the tribe or tribes, when you send the Notice to the parent, Indian custodian, and the tribe or tribes, you must also send a copy to the Secretary of the Interior at 1849 C Street, N.W., Washington, D.C. 20240 and a copy to the Sacramento Area Director, Bureau of Indian Affairs, Federal Office Building, 2800 Cottage Way, Sacramento, CA 95825.

Copy to the Area Director of the Bureau of Indian Affairs

If you do not know the identity and location of the child's parents, Indian custodian, and tribe or tribes, you must send copies of the Notice and the other documents to the Sacramento Area Director, Bureau of Indian Affairs, Federal Office Building, 2800 Cottage Way, Sacramento, CA 95825. In order to help establish the child's tribal identity, provide as much information as possible, including the child's name, birthdate, and birth place; the name of the tribe or tribes; the names of all of the child's known relatives with addresses and other identifying information; and a copy of the petition in the case.

How do you send the Notice and prove to the court that you have done so?

If you have an attorney, he or she will complete the steps described below. If you are representing yourself without an attorney in a probate guardianship case, the court clerk will help you with steps 1 and 2 below, including doing the mailing and signing the certificate of mailing on page 9 of the Notice, but you must deliver copies of the Notice and other documents listed in step 1 below to the court in addressed envelopes ready for mailing and then do step 3.

1. Mail to the persons and organizations listed at the top of this page, by registered or certified mail, with return receipt requested, copies of the following filled-out and signed forms:
   a. Your petition;
   b. Form ICWA-010(A), *Indian Child Inquiry Attachment* or, in a probate guardianship case, form GC-210(CA), *Guardianship Petition—Child Information Attachment;* and
   c. Form ICWA-030, *Notice of Child Custody Proceeding for Indian Child.*
2. The person who does the mailing must fill out the information requested on page 10 of form ICWA-030, *Notice of Child Custody Proceeding for Indian Child,* and then date and sign the original form on page 9.
3. Go to the court and file with the clerk of the court proof that you have given notice to everyone listed above and on page 10 of ICWA-030, *Notice of Child Custody Proceeding for Indian Child.* Your proof must consist of the following:
   a. The original signed Notice (form ICWA-030) and copies of the documents you sent with it (the petition and form ICWA-010(A) or form GC-210(CA));
   b. All return receipts given to you by the post office and returned from the mailing; and
   c. All responses you receive from the child's parents, the child's Indian custodian, the child's tribe or tribes, and the Bureau of Indian Affairs.

Please note that you are subject to court sanctions if you knowingly and willfully falsify or conceal a material fact concerning whether the child is an Indian child or counsel a party to do so. (Welf. & Inst. Code, § 224.2(e).)

CHILD'S NAME:	CASE NUMBER:

1. Name of child:
   Indian child inquiry ☐ made ☐ not made and *(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): _____
      Name of band *(if applicable):* _____

   b. ☐ The child's parents, grandparents, or great-grandparents are or were members of a tribe.
      Name of tribe(s): _____
      Name of band *(if applicable):* _____

   c. ☐ The residence or domicile of the child, child's parents, or Indian custodian is in a predominantly Indian community.

   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 may have Indian ancestry.

   f. ☐ The child has no known Indian ancestry.

   g. ☐ Other reason to know the child may be an Indian child: _____

Person(s) questioned:	Person(s) questioned:
Name: _____	Name: _____
Address: _____	Address: _____
City, state, zip: _____	City, state, zip: _____
Telephone: _____	Telephone: _____
Date questioned: _____	Date questioned: _____
Means of communication: _____	Means of communication: _____
Relationship to child: _____	Relationship to child: _____
Summary of information: _____	Summary of information: _____
_____	_____
_____	_____
_____	_____
_____	_____

   h. ☐ Information about other persons questioned is attached.

2. If this is a delinquency proceeding under Welfare and Institutions Code, § 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)

Form Adopted for Mandatory Use
Judicial Council of California
ICWA-010(A) [New January 1, 2008]

INDIAN CHILD INQUIRY ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CASE NAME:	
CHILD'S NAME:	
PARENTAL NOTIFICATION OF INDIAN STATUS	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 _____
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)*: _____
   Name of band *(if applicable)*: _____
   b. ☐ I may have Indian ancestry. _____
   Name of tribe(s): _____
   Name of band *(if applicable)*: _____
   c. ☐ The child is or may be a member of, or eligible for membership in, a federally recognized Indian tribe.
   Name of tribe *(name each)*: _____
   Name of band *(if applicable)*: _____
   d. ☐ I have no Indian ancestry as far as I know.
   e. ☐ One or more of my parents, grandparents, or other lineal ancestors is or was a member of a federally recognized tribe.
   Name of tribe *(name each)*: _____
   Name of band *(if applicable)*: _____
   Name and relationship of ancestor(s): _____
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.

Form Adopted for Mandatory Use
Judicial Council of California
ICWA-020 [New January 1, 2008]

Welfare & Institutions Code, § 224.3;
Family Code, § 177(a);
Probate Code, § 1459.5(b);
Cal. Rules of Court, rule 5.481
www.courtinfo.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. *(Optional):* E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name):*	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: TELEPHONE NO.:	
CASE NAME:	
NOTICE OF CHILD CUSTODY PROCEEDING FOR INDIAN CHILD *(check all that apply):* ☐ JUVENILE ☐ Dependency ☐ Delinquency ☐ ADOPTION ☐ CONSERVATORSHIP* ☐ CUSTODY (Fam. Code, § 3041) ☐ DECLARATION OF FREEDOM FROM CONTROL OF PARENT ☐ GUARDIANSHIP ☐ TERMINATION OF PARENTAL RIGHTS ☐ VOLUNTARY RELINQUISHMENT OF CHILD BY PARENT	CASE NUMBER: HEARING DATE: DEPT.:

NOTICE TO *(check all that apply):*

☐ Parents or Legal Guardians ☐ Tribes ☐ Indian Custodians ☐ Sacramento Area Director, BIA

☐ Secretary of the Interior

1. NOTICE is given that based on the petition, a copy of which is attached to this notice, a child custody proceeding under the Indian Child Welfare Act (25 U.S.C. § 1901 et seq.) has been initiated for the following child *(a separate notice must be filed for each child):*

Name	Date of Birth	Place of Birth

2. HEARING INFORMATION

a. Date: Time: ☐ Dept.: ☐ Room:
☐ Type of hearing:

b. Address and telephone number of court ☐ same as noted above ☐ is *(specify):*

3. The child is or may be eligible for membership in the following Indian tribes *(list each):*

*Use this form in a conservatorship only if the proposed conservatee is a formerly married minor.

Form Adopted for Mandatory Use
Judicial Council of California
ICWA-030 [New January 1, 2008]

25 U.S.C. § 1901 et seq.;
Welfare & Institutions Code, §§ 224.2, 224.3;
Probate Code, §§ 1449, 1459.5; 1460.2;
Cal. Rules of Court, rules 5.480–5.487 and 7.1015
www.courtinfo.ca.gov

CASE NAME:	CASE NUMBER:

4. Under the Indian Child Welfare Act (ICWA) and California law:
   a. The child's parents, Indian custodian, and the child's tribe have the right to be present at all hearings.
   b. The child's Indian custodian and the child's tribe have the right to intervene in the proceedings when ICWA applies.
   c. The child's parent, Indian custodian, or tribe may petition the court to transfer the case to the tribal court of the Indian child's tribe. The child's parent or tribe also have the right to refuse to have the case transferred to the tribal court.
   d. With the limited exceptions of the detention hearing in juvenile cases and the jurisdiction and disposition hearings in delinquency cases as identified in rule 5.482, the court will give up to 20 days from the time of the scheduled hearing if the child's parent, Indian custodian, or tribe request such time to prepare for the hearing.
   e. The proceedings could lead to the removal of the child from the custody of the parent or Indian custodian and possible adoption of the child.
   f. If the child's parents or Indian custodian have a right to be represented by a lawyer and if they cannot afford to hire one, a lawyer will be appointed for them.
   g. The information contained in this notice and all attachments is confidential. Any tribal representative or agent or any other person or entity receiving this information must maintain the confidentiality of this information and not reveal it to anyone who does not need the information in order to exercise the tribe's rights under the Indian Child Welfare Act (25 U.S.C. § 1901 et seq.).
   h. An Indian custodian is any person who has legal custody of the child under tribal law or custom or state law, or to whom temporary physical custody, care, and control of the child has been transferred by a parent.

5. INFORMATION ON THE CHILD NAMED IN 1
   a. The child's birth certificate is ☐ attached ☐ unavailable
   b. A copy of the tribal registration card of ☐ the child ☐ the parent is attached.
   c. Biological relative information is listed below. *(Indicate if any of the information requested below is unknown or does not apply. Do not use the abbreviation "N/A".) (Required by Fam. Code, § 180; Prob. Code, § 1460.2; and Welf. & Inst. Code, § 224.2.)*

Biological Mother	Biological Father
Name *(include maiden, married, and former names or aliases):*	Name *(include former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:
Additional information:	Additional information:

CASE NAME:	CASE NUMBER:

5. c. INFORMATION ON THE CHILD NAMED IN 1

(Indicate if any of the information requested below is unknown or does not apply; do not use the abbreviation "N/A".)

Mother's Biological Mother (Child's Maternal Grandmother)	Father's Biological Mother (Child's Paternal Grandmother)
Name *(include maiden, married, and former names or aliases):*	Name *(include maiden, married, and former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

Mother's Biological Father (Child's Maternal Grandfather)	Father's Biological Father (Child's Paternal Grandfather)
Name *(include former names or aliases):*	Name *(include former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

CASE NAME:	CASE NUMBER:

5. d. INFORMATION ON THE CHILD NAMED IN 1
(Indicate if any of the information requested below is unknown or does not apply; do not use the abbreviation "N/A".)

Mother's Biological Grandmother (Child's Maternal Great-grandmother)	Mother's Biological Grandmother (Child's Maternal Great-grandmother)
Name *(include maiden, married, and former names or aliases):*	Name *(include maiden, married, and former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

Mother's Biological Grandfather (Child's Maternal Great-grandfather)	Mother's Biological Grandfather (Child's Maternal Great-grandfather)
Name *(include former names or aliases):*	Name *(include former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

CASE NAME:	CASE NUMBER:

5. e. INFORMATION ON THE CHILD NAMED IN 1

(Indicate if any of the information requested below is unknown or does not apply; do not use the abbreviation "N/A".)

Father's Biological Grandmother (Child's Paternal Great-grandmother)	Father's Biological Grandmother (Child's Paternal Great-grandmother)
Name *(include maiden, married, and former names or aliases):*	Name *(include maiden, married, and former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

Father's Biological Grandfather (Child's Paternal Great-grandfather)	Father's Biological Grandfather (Child's Paternal Great-grandfather)
Name *(include former names or aliases):*	Name *(include former names or aliases):*
Current address:	Current address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:
If deceased, date and place of death:	If deceased, date and place of death:

CASE NAME:	CASE NUMBER:

5. f. INFORMATION ON THE CHILD NAMED IN 1
(Indicate if any of the information requested below is unknown or does not apply; do not use the abbreviation "N/A".)

Indian Custodian Information	Indian Custodian Information
Name *(include maiden, married, and former names or aliases)*:	Name *(include maiden, married, and former names or aliases)*:
Current address:	Current former address:
Former address:	Former address:
Birth date and place:	Birth date and place:
Tribe or band, and location:	Tribe or band, and location:
Tribal membership or enrollment number, if known:	Tribal membership or enrollment number, if known:

6. ADDITIONAL INFORMATION ON CHILD NAMED IN 1
(Indicate if any of the information requested below is unknown.)

a. ☐ Biological birth father is named on birth certificate. ☐ Unknown
b. ☐ Biological birth father has acknowledged parentage. ☐ Unknown
c. ☐ There has been a judicial declaration of parentage. ☐ Unknown
d. ☐ Other alleged father *(name each)*:

☐ Unknown

The following optional questions may be helpful in tracing the ancestry of the child in 1.

7. Has the child in 1 or any members of his or her family ever *(if "yes," provide the information requested below)*:

a. Attended an Indian school? ☐ Yes ☐ No ☐ Unknown

Name/relationship to child	Type of school	Dates attended	Name and location of school

CASE NAME:	CASE NUMBER:

b. Received medical treatment at an Indian health clinic or U.S. Public Health Service hospital?

☐ Yes ☐ No ☐ Unknown

Name/relationship to child	Type of treatment	Dates of treatment	Location where treatment given

c. Lived on federal trust land, a reservation or rancheria, or an allotment? ☐ Yes ☐ No ☐ Unknown

Name/relationship to child	Name/description of property and address	Dates of residence

d. Other relative information *(e.g., aunts, uncles, siblings, first and second cousins, stepparents, etc.)*

Name/relationship to child	Current and former address	Birth date and place	Tribe, band, and location

8. ☐ Tribal affiliation and location of child in 1 *(check all that apply):*

a. ☐ 1906 Final Roll Name of relative listed on roll:
Relationship to child in 1:

b. ☐ Roll of 1924 Name of relative listed on roll:
Relationship to child in 1:

c. ☐ California Judgment Roll. Roll number, if known:

CASE NAME:	CASE NUMBER:

9. Additional party information *(list the name, mailing address, and telephone number of all parties notified)* :

Name	Mailing Address	Telephone Number

DECLARATION

(To be completed, dated, and signed in all cases by each petitioner named in companion petition.)

I am the petitioner or we are all of the petitioners in this proceeding. In response to items 5–9 of this form, I/we have given all information I/we have about the relatives and, if applicable, the Indian custodian, of the child named in item 1 of this form.

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

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE)

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE)

Date:

(TYPE OR PRINT NAME) ▶ (SIGNATURE)

CASE NAME:	CASE NUMBER:

CERTIFICATE OF MAILING—JUVENILE COURT PROCEEDINGS

(To be completed by social worker or probation officer.)

I certify that a copy of the *Notice of Child Custody Proceeding for Indian Child*, with a copy of the petition identified on page 1 of this form, was mailed as follows. Each copy was enclosed in an envelope with postage for registered or certified mail, return receipt requested, fully prepaid. The envelopes were addressed to each person, tribe, or agency as indicated below. (Except that the telephone numbers shown below were not placed on the envelopes. They are shown below because they must be disclosed in the *Notice* under Family Code section 180, Probate Code section 1460.2, and Welfare and Institutions Code section 224.2.) Each envelope was sealed and deposited with the United States Postal Service at *(place):*
on *(date):*

Date: Title: Department:

(TYPE OR PRINT NAME) (SIGNATURE)

DECLARATION OF MAILING—ADOPTION, FAMILY LAW, AND PROBATE PROCEEDINGS

(To be completed by the attorney for Petitioner if Petitioner is represented.)

I am an attorney at law, admitted to practice in the courts of the State of California, and attorney for Petitioner in this matter. I declare that a copy of the *Notice of Child Custody Proceeding for Indian Child*, with a copy of the petition identified on page 1 of this form, was mailed as follows. Each copy was enclosed in an envelope with postage for registered or certified mail, return receipt requested, fully prepaid. The envelopes were addressed to each person, tribe, or agency as indicated below. (Except that the telephone numbers shown below were not placed on the envelopes. They are shown below because they must be disclosed in the *Notice* under Family Code section 180, Probate Code section 1460.2, and Welfare and Institutions Code section 224.2.) Each envelope was sealed and deposited with the United States Postal Service at *(place):* on *(date):*

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

Date:

(TYPE OR PRINT NAME) (SIGNATURE OF ATTORNEY)

CERTIFICATE OF MAILING—PROBATE PROCEEDINGS

(To be completed by the clerk of the court if Petitioner is unrepresented.)

I certify that a copy of the *Notice of Child Custody Proceeding for Indian Child*, with a copy of the petition, was mailed as follows. Each copy was enclosed in an envelope with postage for registered or certified mail, return receipt requested, fully prepaid. The envelopes were addressed to each person, tribe, or agency as indicated below. (Except that the telephone numbers shown below were not placed on the envelopes. They are shown below because they must be disclosed in the *Notice* under Family Code section 180, Probate Code section 1460.2, and Welfare and Institutions Code section 224.2.) Each envelope was sealed and deposited with the United States Postal Service at *(place):* on *(date):*

Date: Title: Department:

(TYPE OR PRINT NAME) (SIGNATURE)

This form and all return receipts must be filed with the court.

CASE NAME:	CASE NUMBER:

NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF ALL PERSONS,
TRIBES, OR AGENCIES TO WHOM NOTICE WAS MAILED

1. ☐ Parent *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

2. ☐ Parent *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

3. ☐ Guardian *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

4. ☐ Guardian *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

5. ☐ Indian Custodian *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

6. ☐ Indian Custodian *(Name)*:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

7. ☐ Sacramento Area Director
Bureau of Indian Affairs
Street address: 2800 Cottage Way
City and zip code: Sacramento, CA 95825
Telephone number:

8. ☐ Secretary of the Interior
U.S. Department of the Interior
Street address: 1849 C Street, N.W.
City, state and zip code: Washington D.C. 20240
Telephone number:

9. ☐ Tribe *(Name)*:
Addressee *(Name)*:
Title:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

10. ☐ Tribe *(Name)*:
Addressee *(Name)*:
Title:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

11. ☐ Tribe *(Name)*:
Addressee *(Name)*:
Title:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

12. ☐ Tribe *(Name)*:
Addressee *(Name)*:
Title:
Street address:
Mailing address:
City, state and zip code:
Telephone number:

Note: Notice to the tribe must be sent to the tribe chairman or designated authorized agent for service.

☐ Additional tribes served listed on attached form ICWA-030(A)

SUPERIOR COURT OF CALIFORNIA
COUNTY OF SOLANO

Stepparent Adoption
Confidential Court Investigator's Information & Referral Form

Please answer the following questions thoroughly. Attach additional pages to this form if necessary. Return the completed form to the Court Investigators Office as soon as possible.

Case Number: _____ Date Petition Filed: _____

1. **PETITIONER** *(This is the person asking to adopt a stepchild)*

Name: _____ DOB: _____

Home Address: _____

_____

Telephone: (____) _____ (____) _____
(home) (work)
(____) _____ (____) _____
(cellular) (other)

Social Security Number: _____

Driver's License Number: _____

Sex: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Date of Present Marriage/Registration of Domestic Partnership: _____

List all prior marriages and registered domestic partnerships:

Name of Previous Spouse or Partner:	Date of Marriage or Registration of Domestic Partnership:	Marriage/Partnership Ended Because:	Date Marriage or Partnership Ended:
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	

Turn over and continue on other side...

Have you obtained the consent of both of the child's parents for this adoption? ☐ Yes ☐ No

If you answered "no", please explain:

_____

_____

_____

_____

Have you ever been referred, cited, or arrested for child neglect or abuse? ☐ Yes ☐ No

If you answered "yes", please explain:

_____

_____

_____

_____

_____

Have you ever been arrested for any reason within the last 10 years? ☐ Yes ☐ No

If you answered "yes", please explain:

_____

_____

_____

_____

_____

2. **PARENT RETAINING CUSTODY** *(This is the petitioner's spouse or registered domestic partner)*

Name: _____ DOB: _____

Social Security Number: _____

Driver's License Number: _____

List all prior marriages and registered domestic partnerships:

Name of Previous Spouse or Partner:	Date of Marriage or Registration of Domestic Partnership:	Marriage/Partnership Ended Because:	Date Marriage or Partnership Ended:
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	
		☐ Divorce ☐ Annulment ☐ Death ☐ Notice of Termination of RDP	

Superior Court of California
County of Solano

Court Investigators
Kathleen Thomson, Supervisor

Frances Cervantes
Sandra Marquez Webb
Elizabeth Ichikawa

Michelle Stokes, Probate Examiner

Hall of Justice
600 Union Avenue
Fairfield, CA 94533
Telephone: (707) 207-7390
Fax (707) 428-5017

REFERENCE FOR STEPPARENT ADOPTION

This form is to be completed only by a person not related to the petitioner or the spouse.

NAME OF PETITIONER: _____

1. How well do you know the petitioner? In what capacity?

2. Have you visited the petitioner's home since the present marriage? How often?

3. What is your impression of the present marriage and the home conditions?

4. What do you think of the petitioner's character and stability for the responsibility of parenthood?

5. Describe the petitioner's relationship with the stepchild(ren), from your own observation.

6. Do you feel the proposed stepparent adoption is in the best interest of the child(ren)?
_____ Yes _____ No Please explain.

7. Do you consider the petitioner's present marriage to be a happy and stable marriage?
_____ Yes _____ No Please explain.

8. Is the petitioner a person of good moral character? _____ Yes _____ No Please explain.

9. Do you have any reservations about recommending the adoption?
_____ Yes _____ No Please explain.

10. Is there anything that you can think of that would be detrimental to the child(ren) by allowing this proposed stepparent adoption to be granted?
_____ Yes _____ No Please explain.

11. Do you know of any problems with the petitioner and/or his present marriage concerning unemployment, finances, physical or mental health, marital relations, excessive alcohol usage, drug usage, stress, behavioral or emotional difficulties?

_____ Yes _____ No Please explain.

12. If you have any questions, or if you have additional information that you would like to share with the court investigator, please state it below, or telephone (707) 207-7390.

Print Name: _____ Date: _____

Signature: _____ Telephone: _____

Home Address: _____

Your occupation: _____

Please return this form to the:

Superior Court of California, County of Solano
Court Investigators Office
Hall of Justice
600 Union Avenue
Fairfield, CA 94533

ATTORNEY OR PARTY WITHOUT ATTORNEY (*Name, State Bar number, and address*):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.(*Optional*): E-MAIL ADDRESS (*Optional*): ATTORNEY FOR (*Name*):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SOLANO STREET ADDRESS: 600 Union Avenue MAILING ADDRESS: P.O. Caller 5000 CITY AND ZIP CODE: Fairfield, CA 94533	
IN RE ADOPTION PETITION OF: (*Name*):	
CONSENT OF CHILD TO BE ADOPTED	CASE NUMBER:

1. I, _____,

   born on (*date*): _____, and being age 12 or older, hereby

   consent to my adoption by (*name*) _____.

Date: _____ _____

Signature of Child

Signed in the presence of:

_____

(name)

_____

(title)

on (*date*) _____

Original for Court Record
Certified Copy for State Department of Social Services

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF _____

In the Matter of the Petition of

_____
Petitioner

STEPPARENT ADOPTION

Consent to Adoption by Parent Retaining Custody

I, the undersigned, being the parent of _____ *give my full and*
Name of Minor

free consent to the adoption of said child by _____ *, who is*
Name of Petitioner (Stepparent)

my husband/wife/domestic partner without relinquishing any of my rights, duties, obligations as his/her parent, and I respectfully ask that the petition be granted.

Said child was born on _____ *in* _____ *and is the child*
Date *City and State*

of _____ *and* _____
Name of Legal Parent *Name of Legal Parent*

Date _____ *20* _____ _____
Signature of Parent

Signed in the presence of

_____
**Title*

* The Clerk of the Superior Court, the Probation Officer, or, where stepparent investigations are delegated to County Welfare Departments, a County Welfare Department Staff member may witness.

This form for use only when person giving consent is husband or wife of petitioner or domestic partner, as defined in Family Code Section 297, of petitioner.

Original for court record, certified copy to be sent immediately to California Department of Social Services, Sacramento.

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA IN AND FOR THE COUNTY OF _____

In the Matter of the Petition of

_____
Petitioner

STEPPARENT ADOPTION

Consent to Adoption by a Parent in or outside of California Giving Custody to Husband or Wife or Domestic Partner of Other Parent

I, being the parent of _____ (Gender: M F)
Name of Minor child

Do hereby give my full and free consent to the adoption of said child by

_____ ,
Name of Petitioner (Stepparent)

The petitioner herein, it being fully understood by me that with the signing of this document my consent may not be withdrawn except with court approval and that with the signing of the order of adoption by the court, I shall give up all my rights of custody; services, and earning of said child, and that said child cannot be reclaimed by me.

Said child was born on _____ in _____
Date City and State

And is the child of _____ *and* _____
Name of Birth Parent Name of Birth Parent

DATE _____ _____
Signature of Parent

WITNESS BY:

If this form is being signed in the State of California the Clerk of the Superior Court, the Probation Officer, qualified court investigator or; where stepparent investigations are delegated to County Welfare Departments, a County Welfare Department Staff member may witness. [Family Code § 9003]

If this form is being signed outside the State of California only a notary or other person authorized to perform notary acts within that state can witness.

SIGNED IN COUNTY/STATE	NAME OF AGENCY
NAME OF WITNESS	TITLE OF WITNESS
SIGNATURE OF WITNESS	DATE

COMPLETED BY NOTARY PUBLIC

Complete this section when the form is not being signed in the presence of an agency representative. The Notary Public must staple the acknowledgement document to this form and sign and date.

SIGNATURE OF NOTARY	DATE

NOTICE TO THE BIRTH PARENT WHO CONSENTS TO THE CHILD'S ADOPTION: If you and your child lived together at any time as parent and child, the adoption of your child by a stepparent does not affect the child's right to inherit your property or the property of blood relatives. For further information regarding this right of inheritance, you should consult an attorney at your own expense.

This form to be used only when parent is giving custody of the child to the husband or wife or domestic partner, as defined in Family Code Section 297, or other parent. Original for court record.

Original for Court Record

In the Superior Court of the State of California in and for the County of _____

* *

In the Matter of the Petition of

_____
Petitioner

STEPPARENT ADOPTION

Consent to Adoption by Parent Outside California in Armed Forces Giving Custody to Husband or Wife or Domestic Partner of Other Parent

I, the undersigned, being the parent of _____
Name of Minor

do hereby give my full and free consent to the adoption of said child by

_____
Name of Petitioner (Stepparent)

the petitioner herein, it being fully understood by me that with the signing of this document my consent may not be withdrawn except with court approval, and that with the signing of the order of adoption by the court, I shall give up all my rights of custody, services, and earnings of said child, and that said child cannot be reclaimed by me.

Said child was born on _____ *in* _____ *and is*
Date City and State

the child of _____ *and* _____
Name of Natural Parent Name of Natural Parent

Date _____ *20* ___.

_____
Signature of Parent

On this the _____ *day of* _____, *20*___, *before me* _____,
Name of Officer

the undersigned officer, personally appeared _____ *satisfactorily*
Name of Parent

proven to be (a) serving in the armed forces of the United States, (b) a spouse of a person serving in the armed forces of the United States, or (c) a person serving with, employed by, or accompanying the armed forces of the United States outside the United States and outside the Canal Zone, Puerto Rico, Guam, and the Virgin Islands, and to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same. And the undersigned does further certify that he/she is at the date of this certificate a commissioned officer in the active service of the armed forces of the United States having the general powers of a notary public under the provisions of Section 936 of Title 10 of the United States Code (Public Law 90-632).

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

_____

_____
SIGNATURE OF OFFICER AND SERIAL NUMBER, RANK, BRANCH OF SERVICE AND CAPACITY IN WHICH SIGNED

NOTICE TO BIRTH PARENT WHO CONSENTS TO THE CHILD'S ADOPTION: If you or your child lived together at any time as parent and child, the adoption of your child by a stepparent does not affect the child's right to inherit your property or the property of blood relatives. For further information regarding this right of inheritance, you should consult an attorney at your own expense.

* SEE REVERSE SIDE

This form to be used only when parent is giving custody of child to husband/wife/domestic partner, as defined in Family Code Section 297, of other parent.
Original for court record.

Section 1183.5 of the Civil Code of California states in part:

§ 1183.5, Notarial acts

Armed forces. Any officer on active duty or performing inactive-duty training in the armed forces having the general powers of a notary public pursuant to Section 936 or 1044a of Title 10 of the United States Code (Public Law 90-632 and 101-510) and any successor statutes may perform all notarial acts for any person serving in the armed forces of the United States, wherever he or she may be, or for any spouse of a person serving in the armed forces, wherever he or she may be, or for any person eligible for legal assistance under laws and regulations of the United States, wherever he or she may be, for any person serving with, employed by, or accompanying such armed forces outside the United States and outside the Canal Zone, Puerto Rico, Guam and the Virgin Islands, and any person subject to the Uniform Code of Military Justice outside of the United States.

* * * * * * * * * * *

COURT REPORT OF ADOPTION

STATE FILE NUMBER

NO ERASURES, WHITEOUTS, PHOTOCOPIES, OR ALTERATIONS

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 FATHER/PARENT—FIRST	6B. MIDDLE	6C. LAST (BIRTH)
7A. FULL NAME OF MOTHER/PARENT—FIRST	7B. MIDDLE	7C. LAST (BIRTH)

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.

FATHER/PARENT INFORMATION

CHECK THE APPROPRIATE BOX: ADOPTIVE FATHER/PARENT ☐ BIOLOGICAL FATHER/PARENT ☐

8A. NAME OF FATHER/PARENT—FIRST	8B. MIDDLE	8C. LAST (BIRTH)
9. STATE/FOREIGN COUNTRY OF BIRTH	10. DATE OF BIRTH—MM/DD/CCYY	

MOTHER/PARENT INFORMATION

CHECK THE APPROPRIATE BOX: ADOPTIVE MOTHER/PARENT ☐ BIOLOGICAL MOTHER/PARENT ☐

11A. NAME OF MOTHER/PARENT—FIRST	11B. MIDDLE	11C. LAST (BIRTH)
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. . . . . ☐

Pursuant to Health and Safety Code Section 102640, I choose not to have a new birth certificate established. . . . . ☐

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 ☐ NO ☐

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 county 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.

COUNTY 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 COUNTY 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 ADRESS 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 County Clerk shall complete and transmit a court report of adoption to the Office of Vital Records for each decree of adoption granted by any court in the State of California.

The Office of 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 County 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 Office of 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 the Office of 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 County 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 the Office of Vital Records, but there is an additional fee for each additional certified copy requested. Please contact the Office of Vital Records for the current fees, or visit our website at www.cdph.ca.gov. Please do not order additional copies until you have reviewed the original copy for accuracy. The mailing address for the Office of Vital Records is:

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