

ADOPTION APPLICATION

Date of Application: _____

Husband's Name: (First/Middle/Last) _____

Husband's Age: _____ Husband's Preferred First Name: _____

Wife's Name: (First/Middle/Last) _____

Wife's Age: _____ Wife's Preferred First Name: _____

Address: _____ City: _____ County _____

State: _____ Zip: _____ Home Telephone: _____

Date Married: _____ City/State Where Married: _____

Children in Home: (Names/Genders/Ages) _____

Which are biological? _____ Which are adopted? _____

Church Name: _____ Located in City/State: _____

Pastor's Name: _____

Do you live in: Single Family House Condominium
 Apartment/Duplex Mobile Home/Trailer

Type of child you will accept:

Caucasian Mixed Race (specify): _____ Infant:
 African American _____ Result of Rape
 Hispanic _____ Result of Incest
 Asian _____ Birthparent(s) use:
 American Indian Handicapped Alcohol
 East Indian Twins Drugs
 Older Child Test positive for:
 HIV

- Enclosed is our non-refundable \$100.00 Application Fee.
- Enclosed is our picture taken _____ (month, year).
- Enclosed is a picture of our home.
- A home study, (pre-placement investigation) has been completed on our family.
 Yes No

If home study already completed:

Date of study: _____

Name of Agency: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Social Worker or Certified Investigator: _____ Phone: _____

INFORMATION ADOPTIVE MOTHER

Occupation: _____ Work Phone: _____

Employer/Address: _____

Years at Current Employment: _____ Current Annual Salary: _____

US Citizen: Yes No

Birthdate: _____ City/State: _____

Highest Education Level: _____ SS#: _____ Race: _____

Height: _____ Weight: _____ Hair Color: _____

Eye Color: _____ Complexion: _____

Hobbies/Interests: _____

Briefly tell of your Christian testimony or spiritual background:

Adoptive Mother Signature: _____ Date: _____

INFORMATION ADOPTIVE FATHER

Occupation: _____ Work Phone: _____

Employer/Address: _____

Years at Current Employment: _____ Current Annual Salary: _____

US Citizen: Yes No

Birthdate: _____ City/State: _____

Highest Education Level: _____ SS#: _____ Race: _____

Height: _____ Weight: _____ Hair Color: _____

Eye Color: _____ Complexion: _____

Hobbies/Interests: _____

Briefly tell of your Christian testimony or spiritual background:

Adoptive Father Signature: _____ Date: _____