

Application & Post Adoption Supervision

INSTRUCTIONS: Please fill out the information below and return this application to your local AW social services department. If you have not prepaid for your post adoption reports, please send the post adoption visit fee along with this application. Please check with your local office if you are not sure. They can also provide you with a list of fees in your state, if needed. If you need assistance with this application or have questions regarding fees for our services, please contact your local office.

TYPE OF SERVICE REQUESTED: (Please check one)

_____ **Post adoption Report** Please circle which month report is needed **(1, 3, 6, 9, 12, 18, 24, 36, 60)**
 _____ **Court Report for Re-adoption Purposes (please be advised that the above fees do not include this service)**
 _____ **Other (Please Explain)** _____

I. GENERAL INFORMATION:

Name of Father: _____
 Name on passport: _____
 Profession: _____
 Name and Address of Employer: _____

Name of Mother: _____
 Name on passport: _____
 Profession: _____
 Name and Address of Employer: _____

Home Address: _____

 _____ Street _____ City _____ State _____ Zip _____

Telephone Numbers:
 Home: _____ Work (Husband): _____ Work (Wife) _____
 Fax: _____ Cell or Pager: _____ Email Address: _____

II. INFORMATION ABOUT YOUR ADOPTED CHILD:

Present Name of Adopted Child: _____
 Original Name of Adopted Child: _____
 Date of Birth: _____ Date of Adoption in foreign country: _____
 Name/Province of welfare institute or foster home child was placed out of (ex. Huaibei City/Anhui Province): _____
 Health Status of the child at the time of Adoption: (Check One)
 ___ Healthy ___ Special Needs: (please specify) _____
 Head circumference, height, & weight of your child at time of adoption: _____
 Current head circumference, height, & weight of your child: _____
 Name of Adoption Agency which processed the adoption: _____

Also for families who adopted from China, please give us the document number of "Notice of Coming to China for Adoption" : _____ (Travel letter number eg. (2000) MG-4625-15-0015)
 Date your child became a US Citizen _____

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III. PLEASE SUBMIT A WRITTEN STATEMENT OUTLINING THE FOLLOWING:

- A. A brief statement regarding your current daily routine, hobbies & recreational activities that you've engaged in with your adopted child.
- B. Information regarding any major change in the family structure or environment since the completion of your home study. (e.g. job change, move, change in employment status, change in marital status, addition of a new family member etc.)
- C. Information regarding the adoptive child's:
 - Physical Description: color of hair, eyes, height, weight, & head circumference at the time of adoption and now
 - Physical Stamina/Mobility
 - Intellectual Development (eg. Cognitive and speech & language skills)
 - Health Status of the child at the time of your adoption and now. Please give height, weight and head circumference from your most recent doctor visit, a list of immunizations, is your child up to date? Please provide proof of your child's immunization status
 - Report on any medical treatments for children with special needs, include medical or developmental conditions
 - Discuss your child's and your family's adjustment and attachment.
 - Discuss any community and extended family's response to your adopted child. (Discuss feelings and views of all.)
 - Discuss education of adopted child, if age appropriate and child care arrangements if applicable.
 - Daily routine and life of your adopted child, ie. Diet, sleep patterns, favorite toys, games etc.
 - Status of naturalization, re-adoption in state, if appropriate

IV. FAMILY: (List all persons living in your home; include children, relatives, boarders, roommates and employees.)

Name	Birth date	Relationship	School Grade or Occupation

Other Children (not living in the home): Birth Date/ Relationship/ School grade or Occupation/ Location

V. HOME

Do you own or rent your home? _____ # Of Rooms: _____ # Of Bedrooms: _____ # of Bathrooms: _____
 Does your adopted child have his or her own room? Yes _____ No _____

*****Please send us this application along with your check made payable to the appropriate America World Office (if you have not prepaid for your reports). You can find these offices listed on <http://www.awaa.org/contactus/>**

For countries other than China and Russia, please prepare four recent photos of your child including one of your adopted child with parents. Please arrange pictures on paper and label them with captions.

For China and Russia, please prepare 8 pictures. Please also include a copy of documentation that proves your child's US citizenship (either the Certificate of Citizenship or the US Passport). Please check with your local office about whether they prefer you hold onto the photos until the report is completed or send them with this application.

STAFF USE ONLY:
 P REC: _____ AI P: _____ PHOREC: _____ INC: _____ MED: _____