

SURROGATE'S COURT OF THE STATE OF NEW YORK  
COUNTY OF

.....

In the Matter of Adoption of  
A Child Whose First Name Is

(Docket)(File) No.

PETITION FOR  
ADOPTION  
(Private-Placement)

.....

The Petitioner(s) respectfully allege(s) to this Court that :

[Delete inapplicable provisions.]:

1. Petitioning adoptive parent [specify name]:

a. resides at [specify address, including county]:

b. is of full age, having been born on [specify date of birth]:

c. is (unmarried)

(married to [specify name]:

(married to [specify name]:

and living together

and living

separate and apart pursuant to a decree or judgment of separation or pursuant to a separation agreement subscribed by the parties thereto and acknowledged or proved in the form required to entitle a deed to be recorded);

(married to [specify name]:

and living separate and

apart for at least three years prior to commencement of the proceeding);

d. is of the following religious faith, if any:

e. is engaged in the following occupation [specify]:

and earns \$

(of which \$ is support and maintenance to be received from the Commissioner of Social Services on behalf of the adoptive child).

2. Petitioning adoptive parent [specify name]:

a. resides at [specify address, including county]:

b. is of full age, having been born on [specify date of birth]:

c. is (unmarried)

(married to [specify name]:

and living together

(married to [specify name]:

and living separate

and apart pursuant to a decree or judgment of separation or pursuant to a separation agreement subscribed by the parties thereto and acknowledged or proved in the form required to entitle a deed to be recorded);

(married to [specify name]:

and living separate and apart for at

least three years prior to commencement of the proceeding);

d. is of the following religious faith, if any:

e. is engaged in the following occupation [specify]:

and earns \$

in approximate annual income (of which \$ is support and maintenance to be received from the Commissioner of Social Services on behalf of the adoptive child).

3. The full name, date and place of birth of the adoptive child is

[attach certified copy of birth certificate]

4. Upon information and belief, the religious faith of the adoptive child, if any, is

5. The following is information, as nearly as can be ascertained, concerning the birth or legal parents of the adoptive child:

(a) Full name and last known address

Parent (specify full name and address, if known):

Parent (specify full name and address, if known):

(b) Age and date of birth

Parent (specify name):  
Parent (specify name):

(c) Heritage (specify nationality, ethnic background, race)

Parent (specify name):  
Parent (specify name):

(d) Religious faith, if any

Parent (specify name):  
Parent (specify name):

(e) Education (specify number of years of school or degrees completed at time of birth of adoptive child)

Parent (specify name): \_\_\_\_\_  
Parent (specify name): \_\_\_\_\_

(f) General physical appearance at time of birth of adoptive child (height, weight, color of hair, eyes, skin)

Parent (specify name):  
Ht: \_\_\_\_\_ Wt: \_\_\_\_\_  
Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_  
Skin Color: \_\_\_\_\_

Parent (specify name):  
Ht: \_\_\_\_\_ Wt: \_\_\_\_\_  
Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_  
Skin Color: \_\_\_\_\_

(g) Annex Form 1-D which provides health and medical history at time of birth of adoptive child, including conditions or diseases believed to be hereditary and any drugs or medication taken during pregnancy by child's mother.

(h) Any other information which may be a factor influencing the adoptive child's present or future well-being, including talents, hobbies and special interests of parents: [attach separate sheet if necessary]

6. The manner in which the adoptive parent(s) obtained the adoptive child is as follows:

7. The adoptive child resided with the adoptive parent(s) from [indicate date]:

8. Other persons living in the household are: [Specify names and dates of birth]:

9. The name by which the adoptive child is to be known  
is:

10. Upon information and belief, the adoptive child (has) (has not) been previously adopted.

11. The full name(s) and address(es) of any person(s) having lawful custody of the adoptive child, if known (is)(are)

12. On information and belief, pursuant to Domestic Relations Law §111,

(a) the consent of the birth or legal parent of the adoptive child (is attached hereto) (is not required because

);

(b) the consent of the birth or legal parent of the adoptive child (is attached hereto) (is not required because

);

(c) the consent(s) of the above-named person(s) having lawful custody of the adoptive child (is attached hereto) (is not required because

);

(d) The consent(s) of other person(s)[specify name(s)]:  
(is attached hereto) (is not required because  
.)

13(a)(The consent of the birth or legal parent [specify name]: \_\_\_\_\_ was executed pursuant to section 115-b(3) of the Domestic Relations Law on \_\_\_\_\_, 19\_\_\_\_; the 45th day after execution of the consent is \_\_\_\_\_, 19\_\_\_\_.

(b) (The consent of the birth or legal parent [specify name]: \_\_\_\_\_ was executed pursuant to Section 115-b(3) of the Domestic Relations Law on \_\_\_\_\_, 19\_\_\_\_; the 45th day after execution of the consent is \_\_\_\_\_, 19\_\_\_\_.)

(14. This court is not the court named in the consent(s) of the parent(s) of the adoptive child, attached hereto, as the court in which the adoption proceeding will be commenced, but more than 45 days have elapsed since the date of execution of said consent(s) and, on information and belief, no written notice of revocation has been received by that court.)

(15. That on information and belief said minor child has a (general) (testamentary) guardian. [state nature, date and place of appointment]:

16. To the best of the Petitioner(s)' information and belief, there are no persons other than those mentioned herein or in the verified scheduled annexed hereto who are entitled, pursuant to Domestic Relation Law §111(3) and 111-a, to notice of this proceeding (except)

Name: Relationship:  
Last known address:

Name Relationship:  
Last known address:

Name Relationship:  
Last known address:

17. Attached hereto and made a part hereof is Form 1-D setting forth all available information comprising the adoptive child's medical history.

18. The placement is subject to the provisions of Social Services Law section(s) (374-a) (382) and the provisions of such section(s) have been complied with. The original approval signed by the Administrator of the Interstate Compact on the Placement of Children is attached hereto.

19. (a) The adoptive parent(s) (has)(have) (no) knowledge that the child or an adoptive parent is the subject of an indicated report or is another person named in an indicated report of child abuse or maltreatment, as such terms are defined in section 412 of the Social Services Law, or has been the subject of or the respondent in a child protective proceeding which resulted in an order finding that the child is an abused or neglected child.

(b) The adoptive parent(s) (has)(have) (no) knowledge of any criminal record concerning themselves or any other adult residing in the household (except)

20. There are no prior or pending proceedings affecting the custody or status of the adoptive child, including any proceedings dismissed or withdrawn, (except) [specify type of proceeding, court, disposition, if any, and date of disposition, if any]:

21. The adoptive child (is)(is not) an Indian child within the meaning of the Indian Child Welfare Act of 1978 (25 U.S.C. §§ 1901-1963).

22. [Insert any additional allegations.]

WHEREFORE, the Petitioner(s) prays(s) for an order approving granting temporary guardianship of the child to Petitioner(s) and the adoption of the adoptive child [specify first name]:

by the Petitioner(s) and directing that the adoptive child shall be treated in all respects as the child of the Petitioner(s) and directing that the name of the adoptive child be changed and that (s)he shall henceforth be known by the name of \_\_\_\_\_ together with such other and further relief as may be just and proper.

Dated: \_\_\_\_\_, 19 \_\_\_\_.

\_\_\_\_\_  
Adoptive Parent: typed or printed name / signature

\_\_\_\_\_  
Adoptive Parent: typed or printed name / signature

\_\_\_\_\_  
Adoptive child if over 18: typed or printed name / signature

\_\_\_\_\_  
Attorney, if any: typed or printed name / signature

\_\_\_\_\_  
Attorney's Address and Telephone Number

