

Financial Information	
Circle One: Apartment or house	Rent or monthly mortgage amount:
Amount remaining on mortgage	
Approximate value of property (Zillow)	
Banking amounts	Checking: Savings:
Loans (student, auto, etc.) & amount	
Retirement accounts & amount	
Bankruptcy ever declared?	<input type="checkbox"/> No <input type="checkbox"/> Yes: please explain

Relationship Information/ Children	
Date & Location of Marriage	
Other than the adoptive parents, list all members of your household & their birthdates	
List all previous marriages, including name(s) of previous spouses, date of marriage(s) & date of separation	
List all children from previous relationships & their birthdates	
Are all children within the home immunized?	<input type="checkbox"/> Yes <input type="checkbox"/> No: please explain
Do you plan to immunize your adopted child?	<input type="checkbox"/> Yes <input type="checkbox"/> No: please explain

Adoption Assessment Information	
Name of consulting agency/ adoption placing agency/ attorney	
Type of adoption (select one)	<input type="checkbox"/> Domestic <input type="checkbox"/> Kinship <input type="checkbox"/> International - Country Selected:
Are you adopting from DSS/ Foster Care?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Have either of you initiated, started, or completed a home study with another agency?	<input type="checkbox"/> No <input type="checkbox"/> Yes: Copies of all previous home studies must be submitted
Have either of you previously been rejected as a prospective adoptive parent or have you been the subject of an unfavorable home study?	<input type="checkbox"/> No <input type="checkbox"/> Yes: please explain
Have either of you ever been the subject of an investigation by Child Protective Services?	<input type="checkbox"/> No <input type="checkbox"/> Yes: please explain (If yes, additional fees may apply)

How did you hear about us? _____

We hereby certify that the information provided in this application is true and accurate. We agree to notify Nathanson Adoption Services if we become the subject of any Child Protective Services Assessment prior to the entry of the Final Decree of Adoption.

Adoptive Parent #1

Date

Adoptive Parent #2

Date

If additional pages are required, please provide clarification below

Family Name: _____