CHICAGO VOLUNTEER LEGAL SERVICES

Because equal access to justice is everyone's fight

Today's Date:

Legal Screener Name:

Clinic:

ADOPTION QUESTIONNAIRE
PLEASE COMPLETE *ALL* INFORMATION

ADOPTING PARENTS:

Adopting parties can be divorced, married or single. If a single party is married, they must be separated for 12 months or more.
Documents needed: Child's Birth Certificate; divorce decree – if a client divorced; death certificate for any bio parent or former spouse.

ADOPTIVE MOTHER:

Name:
SSN:
Current Address:
If less than 5 years at the current address, list all other for 5 years:

Telephone:
If none, other number where you can be reached (specify whose telephone)

Length of IL residency:
Date and Place of Birth:
Occupation and Name of Employer:

Employment Address:
Employment Telephone:
Gross *Monthly* Income from Job:
Amount and Source of Other Income:

Date and Place of Marriage to Present Spouse:

Are you currently separated? ☐ Y ☐ N If so, how long?

Previously Married? ☐ Y ☐ N
If yes, how and when did marriage end?

Criminal record (**Both Arrests** and Convictions)? ☐ Y ☐ N
If yes, please provide details, including dates, on separate sheet of paper.
Religion:
Relationship to child(ren), if any:

ADOPTIVE FATHER:

Name:
SSN:
Current Address:
If less than 5 years at the current address, list all other for 5 years:

Telephone:
If none, other number where you can be reached (specify whose telephone)

Length of IL residency:
Date and Place of Birth:
Occupation and Name of Employer:

Employment Address:
Employment Telephone:
Gross *Monthly* Income from Job:
Amount and Source of Other Income:

Date and Place of Marriage to Present Spouse:

Are you currently separated? ☐ Y ☐ N If so, how long?

Previously Married? ☐ Y ☐ N
If yes, how and when did marriage end?

Criminal record (**Both Arrests** and Convictions)? ☐ Y ☐ N
If yes, please provide details, including dates, on separate sheet of paper.
Religion:
Relationship to child(ren), if any:

Does the adoptee or anyone in the adoptee's family identify as American Indian, Native Alaskan or Native American? ☐ Y ☐ N
Does the adoptee or anyone in the adoptee's family have Native American, American Indian, Native Alaskan ancestry? ☐ Y ☐ N
If you suspect or the adoptee or adoptee family member believes they are American Indian, Alaska Native, or Native American, or believe there is Native ancestry contact CVLS.

CHILD TO BE ADOPTED:

(If more than one child, please attach separate sheet for each child.)

Name: Age: Date and Place of Birth:

How long has child lived with adopting parents and under what circumstances did they obtain possession of child?

Name and address of person(s) with whom child resides if not adopting parents:

Explain why child isn't living with adopting parents:

Has the child ever been the subject of any court proceedings? ☐ Y ☐ N

This includes Custody, Guardianship, Divorce or Paternity cases involving the minor and either biological parent. If yes, please provide the details on a separate sheet of paper. Include the type of proceeding, name of court, case number date, and results.

CHILD'S BIOLOGICAL PARENTS:

MOTHER:

Name:

Current or last known address (specify):

(stress the importance to client of at least a last known address. You will be required to prove diligence in attempting to serve the mother if you have to publish)

Date and Place of Birth:

SSN:

Physical Description (race, height, eye color, weight, age):

Was mother married at time of child's birth? ☐ Y ☐ N

If yes, provide name and last known address of husband:

Will mother consent, in court to adoption?

☐ Y ☐ N ☐ Not Sure

If no, will she contest adoption? ☐ Y ☐ N ☐ Not Sure

Does mother contribute towards child's support at all? ☐ Y ☐ N

If yes, how much and how often?

When is the last time mother visited or had any contact with child?

FATHER:

Name:

Current or last known address (specify):

(stress the importance to client of at least a last known address. You will be required to prove diligence in attempting to serve the mother if you have to publish)

Date and Place of Birth:

SSN:

Physical Description (race, height, eye color, weight, age):

Is he listed on birth certificate? ☐ Y ☐ N

If another man is shown on child's birth certificate, complete information for him as well as actual father.

Is father legally acknowledged as father of child? ☐ Y ☐ N

If yes, state one of the three means of legal paternity, if known:

☐ Father on birth cirtificate

☐ Married to mother at time of birth or conection of child

☐ Court Order entered finding legal paternity

(clients will not often be aware of a paternity case, but may a child support case. If a man has been ordered to pay support, paternity has been found)

Will father consent, in court to adoption?

☐ Y ☐ N ☐ Not Sure

If no, will he contest adoption? ☐ Y ☐ N ☐ Not Sure

Does father contribute towards child's support at all? ☐ Y ☐ N

If yes, how much and how often?

When is the last time mother visited or had any contact with child?

IF CLIENT IS ELIGIBLE FOR CVLS SERVICES, PER RULE 298, COURT FEES ARE WAIVABLE WITH CLSP FORM. ADOPTIONS HAVE SOME NON-WAIVABLE COSTS HOWEVER: $125 GAL FEE; $15 PER CHILD NEW BIRTH CERTIFICATE FEE; $60 CRIMINAL BACKGROUND CHECK FEE FOR EACH ADULT LIVING IN HOUSEHOLD (EXCLUDING A BIOLOGICAL PARENT). YOU MUST COLLECT NON-WAIVABLE FEES FROM CLIENT(S) PRIOR TO FILING THE CASE. FEES SHOULD BE DEPOSITED INTO THE CVLS CLIENT ACCOUNT, AVAILABLE WHEN NEEDED.

MEMORANDUM OF CASE:

BRIEF SUMMARY: Why has PC contacted CVLS? What does PC ultimately want?

DETAILED SUMMARY:

Please provide a detailed description of the client's legal matter. This summary may include a timeline of events, the parties involved, and your opinion on whether the client would be an appropriate pro bono client. (Organized, sympathetic, difficult).

UPCOMING COURT DATES OR COURT ACTIVITY:

INTERVIEWER NOTES/ADDITIONAL INFORMATION: