

We need to collect the following information from you, in order to represent you on the legal matter for which you have applied for Legal Aid Services. The Saskatchewan Legal Aid Commission is committed to protecting your privacy. Its entire operations are subject to *The Freedom of Information and Protection of Privacy Act.*

ADOPTION QUESTIONNAIRE

Independent Adoption(not step-parent adoption) Section 13 of *The Adoption Act*

We need the following information about you before we can start an Adoption.

1. **Filled out** Financial Statement (copy of which is attached).
2. Letters from family doctor as to your health and that of the child.
3. Letter from friends, church pastor, etc. as to your home environment, relationship with your spouse and the child to be adopted.
3. Information regarding both birth parents:

Name of Birth Mother: _____

Address of Birth Mother: _____

Name of Birth Father: _____

Address of Birth Father: _____

- (a) **How long were the birth mother and birth father together?**
- (b) **Did the birth mother live with the birth father? If so, when and for how long?**
- (c) **Were the birth mother and birth father married?**
- (d) **Has the birth father ever paid support for the child?**

(e) **Has the birth father ever visited the child or asked to see the child? How often?**

(f) **How did the child come to live with you?**

4. Please have completed Social, Medical, and Family History of the CHILD (this is normally completed by the natural parents and if you are in contact with them, you should have them complete this form and deliver it to either yourselves or our office).

THIS FORM WILL FORM PART OF THE CHILD'S ADOPTION RECORDS AND IT IS IMPORTANT THAT THIS IS COMPLETED IN AS MUCH DETAIL AS POSSIBLE.

5. **Are there any Court Orders or Custody Agreements? We need a copy.**

6. **Is the child a registered status Indian? If so, what band _____ and registration number _____.**

7. **Information about your home** (how many bedrooms, how far it is from schools, etc.)

8. **Information about school.** If child is in school, what school and in what grade.
How child is doing in school.

FULL NAME OF ADOPTIVE FATHER

FULL NAME OF ADOPTIVE MOTHER

WHAT NAME WILL THE CHILD USE AFTER THE ADOPTION

SOCIAL. MEDICAL AND FAMILY HISTORY

(pursuant to Section 18 ~ of *The Adoption Act Regulations*)

1. Name of Child: (including the child's birth weight and length and type of birth) (may make reference to birth certificate)

2. Full Particulars of Child's birth parents:
Attach a copy of the Birth Registration

Father Full Name:

Date of Birth:

Place of Birth:

Racial and Ethnic Origin:

Marital Status:

Appearance, personality, interest and special skills or talents:

Educational level and achievements:

Occupation and occupational history:

Religious affiliation, if any:

Other child, if any, including the name, age, health, personality, interests and educational level and whether or not the child is living with the person:

Mother Full Name:

Date of Birth:

Place of Birth:

Racial and Ethnic Origin:

Marital Status:

Appearance, personality, interest and special skills or talents:

Educational level and achievements:

Occupation and occupational history:

Religious affiliation, if any:

Other child, if any, including the name, age, health, personality, interests and educational level and whether or not the child is living with the person:

3. Health condition and medical disorders including heart condition, blood or circulation disorders, allergies, lung diseases, cancer, epilepsy, muscular dystrophy, cerebral palsy, multiple sclerosis, diabetes, kidney or liver problems, rheumatism or arthritis, eye or ear problems, skin problems, sexually transmitted diseases, mental illness and mental retardation as well as the health condition and medical disorders of the person's child, parents, siblings or other birth relatives:

Treatment and prognosis with respect to any medical disorders.

4. Whether the birth parents jointly agreed on the adoption plan for the child:
5. The reason the birth parent placed the child for adoption:
6. The degree to which other family members of the birth parent were aware of the pregnancy and adoption placement of this child, and, if so, their names and addresses:
 - (a)
 - (b)
7. Name, Age, Occupation and education of the Adopting Applicant's parents and siblings, if any; (both parents)
8. Information in regard to the Applicant's marital relationship:

FOR OFFICE USE ONLY

LAWYER HANDLED - INDEPENDENT ADOPTION

Section 13

(Sections of the Act are in bold; sections of the Regulations are in regular type)

Note: The Department of Community Resources and Employment requires copies of the documents

_____ Documents served on director where the applicants reside (30 day notice) **44(2)(a)** and pursuant to **16(16) 13**

_____ Acknowledgment of Service document-complete if submitted by lawyer **13(e)**

_____ Extension Beyond one year that the director may allow **16(8)**

_____ 30 Day Notice for Inter-Provincial placements/other period that the director may allow **(25)**

_____ Application For Order of Adoption Form A-I, Clause 3(a) **16**

_____ Certified Copy of the Child's Original Birth Registration (long form) **13(a)**

_____ Certified Copy of Marriage Registration or Certificate (long form preferred) see **16(2)(a)**

_____ Divorce Decree (if applicable)

_____ Death Certificate (if applicable)

_____ Certificate of Counselling (must be completed by director prior to consent) **4(4)(a)(ii), 4(6)**, Form F 8-
Birth mother _____ Birth father _____

_____ Consent of the Birth Parent **4(1)&(2)&(4)**; Form C-1 Clause 5(1)(a)
Birth mother _____ Birth father _____
Revocation Period Expires _____

_____ Certificate of Independent Advice (must be completed by director after consent) **4(4)(a)(111) & 4(7)**; Form G 9-
 Birth mother _____ Birth father _____
OR

_____ Dispensation Order-Notice re application to dispense with requirement of consent and supporting materials must be provided to the director; dispensation order **5 (2)(1)**
 Appeal Period Expires _____ **22(1)**

_____ Birth Parent Acknowledgment Form N Clause **13(h)** and subsection **14(2)**

_____ Consent of a child who is 12 years of age or more and acknowledgment Form C-5, 5(3), 13(h), 14(4) **4(1)(b) -with affidavit of _____** Child over 12 years-Certificate of Independent Advice 4(4)(b)(ii);7 Form G. 9

_____ Child's Social, Medical and Family History
 15(1)(b). 16(1),18(1) or request to waive requirement for birth parents 15(2) or 16(2)

_____ Report for the Court-(Adoption Study Report)-13(3) 16(1) 18(2)

_____ Financial Statement Form K 13(0)

_____ Adoptive Parents' Agreement Form O Clause 13(h) and subsection 14{3)

_____ Information for the Registrar Pursuant to the Indian Act (Canada) . Form M, 13(g) definition re "status Indian" 29.3(3)(c) (repealed)

_____ Statement of Fees **16(13)**; 52(1)&(2)

_____ Particulars of Adoption Form L, Clause 13(f)

_____ Notice of Fiat or Decision 19(1), Form H, Section 10

_____ Order of Adoption 16(1) Form I-1, Clause 11(a)

_____Certificate of Non- Revocation 13(b)

Department (Director) -Handled:

1. _____Departmental Records Check (completed by Community Resources and Employment)
2. _____Registry Search for Revocation
3. _____Issue Certificate of Non-Revocation
4. _____Issue Acknowledgment of Application and Supporting Material for an Order of Adoption