



Nathanson
Adoption Services
The Homestudy Agency

Helene M. Nathanson, MHDL, Executive Director

APPLICATION FOR ADOPTION SERVICES

Last Name _____

Home Phone _____

Cell Phone: _____

Cell Phone: _____

Address _____
 street city zip

Email Address _____

Directions to your home from the nearest interstate _____

If you need more space to answer a question, please attach a separate sheet of paper.

How did you hear about us? _____

Adoptive Parent 1

Adoptive Parent 2

Name _____

Name _____

SS# _____

SS# _____

Birth date _____ Place _____

Birth date _____ Place _____

US Citizen? _____

US Citizen? _____

Ethnic Origin _____

Ethnic Origin _____

Height _____ Weight _____ Age _____

Height _____ Weight _____ Age _____

Color of: _____

Color of: _____

Eyes _____ Hair _____ Complexion _____

Eyes _____ Hair _____ Complexion _____

Education: _____

Education: _____

 Last Year Completed / Degree

 Last Year Completed / Degree

Colleges Attended and Dates: _____

Colleges Attended and Dates: _____

 Occupation

 Occupation

Employer _____

Employer _____

Work Phone # _____

Work Phone # _____

Salary _____ Other Income _____

Salary _____ Other Income _____

States of residence for the past 5 years: _____

States of residence for the past 5 years: _____

Date and Location of Marriage _____

If previously married, list name(s) of previous spouse(s), date(s) of marriage(s), and date(s) of divorce or death of spouse. List all children from previous marriages/relationships.

Adoptive Parent 1's Health (include any medical problems in the last ten years)

Adoptive Parent 2's Health (include any medical problems in the last ten years)

Have either of you been treated for substance abuse and/or have either of you been treated by a mental health professional? (If yes, describe circumstances)

Do you plan to immunize your child? Yes No

Type of Adoption (circle one): Domestic International Country selected? _____

Name/address of Adoption Agency/Attorney _____

Are you adopting from DSS/Foster Care? Yes No

Insurance	Kind	Amount	Beneficiary
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Assets	Kind (Bank Accounts, Stock Portfolio, etc.)	Total
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Home – Apartment or House? _____ Rent or Mortgage Monthly Payment _____

Approximate Value of Property _____ Amount Left on Mortgage _____

Current Debts: Item Amount

Have you ever declared bankruptcy? If yes, please explain _____

List all members of your household, including children, and their birth dates _____

Have either of you been arrested? If yes, please explain _____

Have either of you been denied approval of a pre-placement assessment? _____

If yes, please explain _____

Have either of you ever been the subject of an investigation by Child Protective Services? _____

If yes, explain (additional homestudy fees apply) _____

We hereby certify that the information furnished 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)