

**6th JUDICIAL CIRCUIT COURT- FAMILY DIVISION, ADOPTION SERVICES
ADOPTION QUESTIONNAIRE – ADULT**

Name of Adult Adoptee: _____
First Middle Last

Maiden Name, if Married: _____
First Middle Last

Name After Adoption: _____
First Middle Last

Date of Brith: _____ Email: _____

Present Address: _____
No. Street City State Zip Code

Phone Number: (Home) _____ (Cell) _____ (Work) _____

THE MICHIGAN ADOPTION CODE REQUIRES BIRTH PARENTS TO RECEIVE A NOTICE OF ADOPTION.

Please provide the following information:

Birth Father's Name: _____
First Middle Last

Date of Brith: _____ Email: _____

Present/Last Known Address: _____
No. Street City State Zip Code

Birth Mother's Name: _____
First Middle Last

Date of Brith: _____ Email: _____

Present/Last Known Address: _____
No. Street City State Zip Code

Name of Proposed Adoptive Father: _____
First Middle Last

Date of Brith: _____ Email: _____

Present Address: _____
No. Street City State Zip Code

Phone Number: (Home) _____ (Cell) _____ (Work) _____

Name of Proposed Adoptive Mother: _____
First Middle Last

Date of Brith: _____ Email: _____

Present Address: _____
No. Street City State Zip Code

Phone Number: (Home) _____ (Cell) _____ (Work) _____

Have proposed adoptive parents ever been convicted in a criminal proceeding, imprisoned, placed on probation or parole (including DUI)? Yes No

If yes, please provide a **letter** of explanation.

I have examined this adoption questionnaire and the contents are true.

Date of Proposed Parent Signature

Signature of Proposed Adoptive Mother

Signature of Proposed Adoptive Father