

# RAYMOND W. GODWIN

Attorney at Law, PC

PRACTICE AREA LIMITED TO ADOPTION & CHILDREN'S LAW

PO Box 354, Greenville, SC 29602  
Phone: 864.241.2883 | Fax: 864.255.4342  
www.scadopt.net

## ADOPTIVE PARENT INTAKE FORM

Date: \_\_\_\_\_

### CLIENT INFORMATION

*\* Please list wife's name as it should appear on legal documents and vital records forms*

Husband's Legal Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Wife's Legal Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Wife's Maiden Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Marriage Date: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

### Contact

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Call first?

Business: (His) \_\_\_\_\_ Cell: (His) \_\_\_\_\_

Business: (Hers) \_\_\_\_\_ Cell: (Hers) \_\_\_\_\_

**Children** (If more than 4, please list under Additional Notes at the end of this form)

Name	Date of Birth	Race	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### General Information

	Adoptive Father	Adoptive Mother
Date & Place of Birth	_____	_____
Height & Weight	_____	_____
Hair & Eye Color	_____	_____
Number of Previous Marriages	_____	_____
Religion	_____	_____
Race	_____	_____
Hobbies/Interests:	_____	_____
Last Grade/Degree Completed	_____	_____
Occupation & Type of Industry*	_____	_____
Annual Salary	_____	_____

\* Example: project manager, manufacturing

# ADOPTIVE PARENT INTAKE FORM

## Home Study

Do you have a current Home Study? (Completed within the last 9 months) \_\_\_\_\_

Completed by: \_\_\_\_\_ Are you willing to travel to another state? \_\_\_\_\_

## ADOPTION PREFERENCES

Gender:  Male only  Prefer boy/consider girl  
 Female only  Prefer girl/consider boy  
 Either male or female

Race:  Caucasian  Caucasian/American Indian  Asian  
 Caucasian/Hispanic  Caucasian/African-American  American Indian  
 Caucasian/Asian  Hispanic  African American

Age Preference: Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

Number of Children:  One Child  Sibling group (2 children)  
 Twins  Sibling group (3 children)

## BUDGET

Fees and expenses are a sensitive issue. Some birth mothers have more expenses than others. Sometimes agencies or advertising sources refer birth mothers to us which can increase the fees; however, such referrals usually can reduce your wait for a child. When we contact you, we want to make sure that you are comfortable with the projected expenses involved in the adoption. Thus, in order to spare you much disappointment, please evaluate the fees/expenses that you feel you can afford or are willing to pay to complete an adoption. Please note that you will be considered for a placement for any amount *at or under* your budget range. If you wish to be called when the estimated fees are a little over your specified budget, please note that next to the range that you choose. Also, you should be aware that our estimated fees for your adoption include everything involved *except* travel expenses (if your baby is born in another state), Home Study, Post Placement Report, and Guardian *ad litem* (person who represents the minor child at the final adoption hearing).

Budget Range:  \$ 18,500 - \$ 20,000  
 \$ 20,500 - \$ 23,000  
 \$ 23,500 - \$ 25,000  
 Over \$25,000

# ADOPTIVE PARENT INTAKE FORM

## ADDITIONAL INFORMATION

Why do you wish to adopt?

Are you willing to consider a child with special needs? If so, to what extent?

Are you willing to consider a situation where the birth mother has been diagnosed with a mental illness (i.e. depression, bipolar, schizophrenia)? Please specify what conditions you would consider if given more information:

Have you read any books on adoption or attended any seminars? If so, please explain:

How soon do you hope to complete an adoption?

After the child is placed in your home, will both parents work outside the home? If so, what are your plans for childcare?

Are you willing to consider open adoption? If so, to what extent (i.e. visits, phone calls, letters, and pictures)?

Please list any additional languages you speak:

# ADOPTIVE PARENT INTAKE FORM

How did you hear about our office and why have you chosen to retain us?

## Additional Notes

## PORTFOLIO

Some birth mothers request to view portfolios in order to help them choose a family for their baby. As a rule, if the situation is one that exactly matches your criteria, then we will not notify you prior to sending your portfolio to a birth mother; however, if there is something that is abnormal about the situation, we will call beforehand. Some couples do not want to be notified every time their portfolio is sent in order to avoid the emotional stress. Others like to be notified, so they know the status of their adoption plans.

Would you like to be notified every time your portfolio is shown?

We hereby give our permission for Raymond W. Godwin, Esq. to use any photos that we send him or his office for use on his website, pamphlets, booklets, or published material.

**Digital Signature** \_\_\_\_\_

[CLICK HERE](#)

to attach the completed Intake Form  
to an email and send to our office via email at  
[assistant@scadopt.net](mailto:assistant@scadopt.net)