

# RAYMOND W. GODWIN

Attorney at Law, PC

PRACTICE AREA LIMITED TO ADOPTION & CHILDREN'S LAW

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## ADOPTIVE PARENT INTAKE FORM: Re-adopt or Foreign--Finalized in USA

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: \_\_\_\_\_

Do you have a current Home Study? \_\_\_\_\_ Completed by: \_\_\_\_\_

What agency or facilitator did you use to complete this adoption? \_\_\_\_\_

Who has legal custody of the child? \_\_\_\_\_

### 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	_____	_____

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	Adoptive Father	Adoptive Mother
Race	_____	_____
Hobbies/Interests:	_____	_____
Last Grade/Degree Completed	_____	_____
Occupation & Type of Industry*	_____	_____
Annual Salary	_____	_____

*\* Example: project manager, manufacturing*

## INFORMATION FOR CHILD(REN) BEING ADOPTED OR READOPTED

### First Child

Birth Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Race: \_\_\_\_\_ Gender: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Country: \_\_\_\_\_  
Name of Orphanage: \_\_\_\_\_  
Name as you wish it to appear on amended birth certificate: \_\_\_\_\_  
Date of Placement: \_\_\_\_\_ For vital records form: Wife's Maiden Name: \_\_\_\_\_  
Date of Adoption in Foreign Country: \_\_\_\_\_ Adoption Decree Number: \_\_\_\_\_  
Did birth mother sign relinquishments or abandon the child? \_\_\_\_\_  
Did birth father sign relinquishments or abandon the child? \_\_\_\_\_

### Second Child

Birth Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Race: \_\_\_\_\_ Gender: \_\_\_\_\_  
Place of Conception: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Country: \_\_\_\_\_  
Name of Orphanage: \_\_\_\_\_  
Name as you wish it to appear on amended birth certificate: \_\_\_\_\_  
Date of Placement: \_\_\_\_\_ For vital records form: Wife's Maiden Name: \_\_\_\_\_  
Date of Adoption in Foreign Country: \_\_\_\_\_ Adoption Decree Number: \_\_\_\_\_  
Did birth mother sign relinquishments or abandon the child? \_\_\_\_\_  
Did birth father sign relinquishments or abandon the child? \_\_\_\_\_

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## Additional Notes

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

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)