

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: 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? _____

Please list any additional languages that you speak: _____

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	_____	_____

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

	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? _____

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

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 _____



**to attach the completed Intake Form
to an email and send to our office via email at
assistant@scadopt.net**