

ACROSS THE WORLD ADOPTIONS (ATWA)
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APPLICATION

GENERAL INFORMATION:

Applicant I

Applicant II

Full name as it appears (or will appear) on your passport

List other names used (but not nicknames)

Home Address:

County: _____

Home Phone Number () _____ Home Fax Number () _____

Home E-mail _____ Home E-mail _____

Do not list the number below if we do not have permission to contact you there.

Cell Phone () _____ Cell Phone () _____

Work Phone () _____ Work Phone () _____

Fax Number () _____ Fax Number () _____

How did you hear about Across The World Adoptions? _____

Applicant I

Age: _____ Date of Birth: _____

Hair Color: _____ Eye Color: _____

Place of Birth: _____

Citizenship: _____

Ethnicity: _____

Social Security No. _____

Passport No. _____

Date of Expiration _____

Applicant II

Age: _____ Date of Birth: _____

Hair Color: _____ Eye Color: _____

Place of Birth: _____

Citizenship: _____

Ethnicity: _____

Social Security No. _____

Passport No. _____

Date of Expiration _____

MARRIAGE (if applicable):

Date of Current Marriage: _____

County/State of License: _____

Applicant I

Number of Previous Marriages (if any): _____

Dates of Previous Marriage Dates Marriage Ended

1. _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

Applicant II

Number of Previous Marriages (if any): _____

Dates of Previous Marriage Dates Marriage Ended

1. _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

RESIDENCE:

Have you lived or worked outside of California in the past two years? If so, where?

Applicant I: Yes No

Applicant II: Yes No

Do you live in an apartment or a house? _____

Do you rent/lease or own? _____ # of bedrooms _____ Square Footage: _____

Monthly rent or mortgage payment \$ _____

EMPLOYMENT

Applicant I

Name of Employer:

Position:

Address of Employer:

Monthly Gross Income:

Date of Employment:

Applicant II

Name of Employer:

Position:

Address of Employer:

Monthly Gross Income:

Date of Employment:

ARREST HISTORY:

List all arrests and detentions even if the charge was dismissed, did not result in a conviction, was set aside, reversed, or expunged. If you do not disclose all arrests and detentions, services may be terminated, additional fees may apply or a negative recommendation could result. During the homestudy process, you will then be asked to provide a written explanation of each incident, the court disposition and possibly the police report.

Have you ever been arrested or detained?

Applicant I: Yes No

Applicant II: Yes No

When	Charge
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

When	Charge
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

CHILDREN:

List all children of either or both applicants, even if they do not live with you or are adults. Specify if a child of both applicants or Applicant I alone or Applicant II alone.

<u>Name</u>	<u>Birthdate</u>	<u>Child of Both, App I or App II?</u>	<u>Adopted?</u>	<u>Living in your home?</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

All children will be contacted about your adoption (including adult children). Your signature on this application indicates your consent for us to contact your children regarding your adoption. Please provide the information below on each child not in your home. Continue on an additional sheet, if needed.

1. Name: _____ Phone: () _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____

2. Name: _____ Phone: () _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____

3. Name: _____ Phone: () _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____

Are you currently able to have biological children? Yes No

If no, please explain: _____

OTHERS IN THE HOME:

Please list the names, birth dates and relationship of any other minor or adult living in your home:

<u>Name</u>	<u>Birthdate</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

REFERENCES:

Please list the names, addresses and phone numbers of three references. When selecting references, try to choose people from different areas of your life (i.e. a pastor, co-worker, or friend). If a couple, it is preferable that the reference know both of you. Please do not list relatives, your employer or people you employ or supervise. We will send each of them a letter and ask them to write about your character, interest in children, values, etc.

1. Name: _____ Phone: () _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

2. Name: _____ Phone: () _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

3. Name: _____ Phone: () _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

ADOPTION PREFERENCES:

Do you have a child already selected for adoption? Yes No

A. **If yes**, please describe the child:

Name: _____ Birth date: _____

Race: _____ Country of Origin: _____

Please describe the child's adoptive status and your present relationship with the child:

B. **If no**, please state your preferences for a child:

Age Range: _____ Race: _____ Sex: _____ Country: _____

Would you consider a child with a physical disability? Yes No

Would you consider a child with a mental disability? Yes No

Are there other areas of preference? _____

ADOPTION HISTORY:

Have you ever adopted before, even if the adoption was later reversed, disrupted or dissolved?

Applicant I: Yes No

Applicant II: Yes No

If yes, please explain: _____

Have you ever been licensed as a foster parent or cared for any related/unrelated children other than those listed on page 4?

Applicant I: Yes No

Applicant II: Yes No

If yes, please explain when, where, and the name of the agency: _____

Please list the name and address of each adoption agency, attorney, facilitator or organization with whom you are *currently* working.

Name: _____

Address: _____

Contact person name, phone and email: _____

Name: _____

Address: _____

Contact person name, phone and email: _____

Please list the name and address of each foster or adoption agency, attorney, facilitator or organization with whom you have applied in the past. Explain result - whether you were approved, denied, put on hold, completed adoption, stopped contact etc. If you do not disclose all applications, regardless of result, services may be terminated or a negative recommendation could result.

Name: _____

Address: _____

Result: _____

Name: _____

Address: _____

Result: _____

EMERGENCY CONTACT:

Please provide the name, address and phone number of someone not in your home but who will always know where you live (this person may be a relative).

Name: _____ Phone: () _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

CONSENTS, ACKNOWLEDGMENTS, AND SIGNATURES:

We/I consent to Across The World Adoptions' contact with our/my children concerning our/my prospective adoption. We/I further consent to the complete exchange of information about us/me between Across The World Adoptions and any other agencies, organizations or individuals who may also be involved in our/my current adoption process. We/I understand this may include communication between Across The World Adoptions and Citizenship and Immigration Services. We/I have filled out this application to the best of our/my knowledge. We/I understand any misrepresentation or omissions could lead to an unfavorable recommendation. We/I understand that submission of an application does not guarantee a favorable recommendation at the home study stage or approval by the Citizenship and Immigration Services. We/I understand Across The World Adoptions and all its employees provide social services only, not legal services. We/I understand that we/I should consult an attorney if we/I have any legal questions on adoption, immigration, tax or any other legal issue.

Applicant I: _____ Date: _____

Applicant II: _____ Date: _____