

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
\_\_\_\_\_ COUNTY, ILLINOIS

IN THE MATTER OF THE PETITION OF: )

\_\_\_\_\_ and )  
\_\_\_\_\_, )  
Husband and Wife, )

TO ADOPT )

\_\_\_\_\_, )  
A Minor. )

) Case No. \_\_\_\_\_ - AD - \_\_\_\_\_

PETITION FOR ADOPTION

Now come the petitioners, \_\_\_\_\_, and they  
allege as follows:

1. They are husband and wife, of lawful age, and under no legal disability. They reside in the City of \_\_\_\_\_, County of \_\_\_\_\_ and State of Illinois. The petitioner, \_\_\_\_\_, has resided in the State of Illinois for a period of \_\_\_\_\_ years immediately proceeding the filing of this Petition, and the petitioner's spouse, \_\_\_\_\_, has resided in the State of Illinois for a period of \_\_\_\_\_ years immediately proceeding the filing of this Petition.

2. They desire to adopt \_\_\_\_\_, a male/female minor child who is about \_\_\_\_\_ years of age and who was born on \_\_\_\_\_, at \_\_\_\_\_, in \_\_\_\_\_ County, \_\_\_\_\_. The child is in the custody of and resides with the petitioners.

3. The mother of the child is \_\_\_\_\_, and she is the female petitioner in this cause. The father is \_\_\_\_\_.

4. The mother and father of the child were married on \_\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_ County, \_\_\_\_\_.

5. The mother married \_\_\_\_\_, the male petitioner herein, on \_\_\_\_\_, and the mother consents to the adoption of the minor child by the petitioners herein, and her consent is evidenced in writing by the mother signing her name to this Petition for Adoption.

6. The biological father of the said child is \_\_\_\_\_ who resides in \_\_\_\_\_, \_\_\_\_\_ County, \_\_\_\_\_.

7. The petitioners are reputable people of good moral character with sufficient ability and financial means to rear, nurture, and educate the said child in a suitable and proper manner.

8. The biological father is an unfit parent in that he has abandoned and deserted the minor child for more than three months proceeding the commencement of this adoption and has failed to maintain a reasonable degree of interest, concern or responsibility as to the minor child's welfare.

Your petitioners make \_\_\_\_\_, a minor, and \_\_\_\_\_, the father, parties defendant to this cause, and

**THE PETITIONERS REQUEST OF THIS COURT:**

A. For leave to adopt as their own child the said minor and for leave to change the name of the said minor child to \_\_\_\_\_.

B. For such further relief and for the entry of such additional order or orders as may be necessary or appropriate in this proceeding.

\_\_\_\_\_  
Petitioner,

\_\_\_\_\_  
Petitioner,

Attorney Name: \_\_\_\_\_

Representing: \_\_\_\_\_

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

City, State: \_\_\_\_\_

Phone: \_\_\_\_\_

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

STATE OF ILLINOIS                    )  
  )  
COUNTY OF \_\_\_\_\_aaaa\_ )       SS:

\_\_\_\_\_ and \_\_\_\_\_, husband and wife, being first duly sworn on oath depose and say that they have signed their name to the above and foregoing PETITION FOR ADOPTION, that they know the contents thereof and that the matters alleged in it are true.

\_\_\_\_\_  
Petitioner,

\_\_\_\_\_  
Petitioner,

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
\_\_\_\_\_ COUNTY, ILLINOIS

IN THE MATTER OF THE PETITION OF: )

\_\_\_\_\_ and )  
\_\_\_\_\_, )  
Husband and Wife, )

TO ADOPT )

\_\_\_\_\_, )  
A Minor. )

Case No. \_\_\_\_\_ - AD - \_\_\_\_\_

NOTICE OF HEARING

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOU ARE HEREBY NOTIFIED that on the \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, at \_\_\_\_\_, or as soon thereafter as we may be heard, the undersigned  
will appear before the Presiding Judge, in the room usually occupied by him/her in the  
\_\_\_\_\_ County Courthouse, \_\_\_\_\_, Illinois and then  
and there call up for hearing the Petition For Adoption.

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Petitioner

**PROOF OF SERVICE BY MAIL**

The undersigned certifies, under penalties as provided by law pursuant to section 1-109 of  
the Illinois Code of Civil Procedure, that they served this notice by mailing a copy to addressee(s)  
shown above, at address(es) shown above, and depositing the same in the U.S. Mail  
at \_\_\_\_\_, Illinois, at approximately \_\_\_\_\_ on \_\_\_\_\_, with proper postage  
prepaid; and further that the statements set forth in this Proof of Service are true and correct.

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Petitioner

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
\_\_\_\_\_ COUNTY, ILLINOIS

IN THE MATTER OF THE PETITION OF: )  
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\_\_\_\_\_ and )  
\_\_\_\_\_ )  
Husband and Wife, )  
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TO ADOPT )  
\_\_\_\_\_ )  
A Minor. )

Case No. \_\_\_\_\_ - AD - \_\_\_\_\_

FINAL AND IRREVOCABLE CONSENT TO ADOPTION  
BY A SPECIFIED PERSON OR PERSONS

I, \_\_\_\_\_, mother father of  
\_\_\_\_\_, a male female minor child, state as follows:

1. That such child was born on \_\_\_\_\_ at \_\_\_\_\_.
2. That I reside at \_\_\_\_\_.
3. That I am \_\_\_\_\_ years old.
4. That I hereby enter my appearance in this proceeding and waive service of summons on me.
5. That I hereby acknowledge that I have been provided a copy of the **Birth Parent Rights and Responsibilities-Private Form** before signing this Consent and that I have had time to read, or have had read to me, this Form and that I understand the Rights and Responsibilities described in this Form. I understand that if I do not receive any of my rights as described in said Form, it shall not constitute a basis to revoke this Final and Irrevocable Consent to Adoption by a Specified Person.
6. That I do hereby consent and agree to the adoption of \_\_\_\_\_ by Petitioners herein, \_\_\_\_\_ and \_\_\_\_\_ only.
7. That I wish to and understand that upon signing this consent I do irrevocably and permanently give up all custody and other parental rights I have to such child if such child is adopted by \_\_\_\_\_ and \_\_\_\_\_. I hereby transfer all of my rights to the custody, care and control of such child to \_\_\_\_\_ and \_\_\_\_\_.

\_\_\_\_\_.

8. That I understand such child will be adopted by \_\_\_\_\_ and \_\_\_\_\_ and that I cannot under any circumstances, after signing this document, change my mind and revoke or cancel this consent or obtain or recover custody or any other rights over such child if \_\_\_\_\_ and \_\_\_\_\_ adopt(s) such child; PROVIDED that each specified person has filed or shall file, within 60 days from the date hereof, a petition for the adoption of such child.

9. That if the specified person or persons designated herein do not file a petition for adoption within the time-frame specified above, or, if said petition for adoption is filed within the time-frame specified above but the adoption petition is dismissed with prejudice or the adoption proceeding is otherwise concluded without an order declaring the child to be the adopted child of the specified person or persons, then I understand that I will receive written notice of such circumstances within 10 business days of their occurrence. I understand that the notice will be directed to me using the contact information I have provided in this consent. I understand that I will have 10 business days from the date that the written notice is sent to me to respond, within which time I may request the Court to declare this consent voidable and return the child to me. I further understand that the Court will make the final decision of whether or not the child will be returned to me. If I do not make such request within 10 business days of the date of the notice, then I expressly waive any other notice or service of process in any legal proceeding for the adoption of the child.

10. That I expressly acknowledge that nothing in this Consent impairs the validity and absolute finality of this Consent under any circumstance other than those described in paragraph 9 of this Consent.

11. That I understand that I have a remaining duty and obligation to keep the attorney for \_\_\_\_\_ and \_\_\_\_\_ informed of my current address or other preferred contact information until this adoption has been finalized. My failure to do so may result in the termination of my parental rights and the child being placed for adoption in another home.

12. That I do expressly waive any other notice or service of process in any of the legal proceedings for the adoption of the child as long as the adoption proceeding by the specified person or persons is pending.

13. That I have read and understand the above and I am signing it as my free and voluntary act.

14. That I acknowledge that this consent is valid even if the specified person or persons separate or divorce or one of the specified persons dies prior to the entry of the final judgment for adoption.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.



## **Birth Parent Rights and Responsibilities-Private Form**

As a birth parent in the State of Illinois, you have the right:

1. To have your own attorney represent you. The prospective adoptive parents may agree to pay for the cost of your attorney in a manner consistent with Illinois law, but they are not required to do so.
2. To be treated with dignity and respect at all times and to make decisions free from coercion and pressure.
3. To receive counseling before and after signing a Final and Irrevocable Consent to Adoption ("Consent"), a Final and Irrevocable Consent to Adoption by a Specified Person or Persons: Non-DCFS Case ("Specified Consent"), or a Consent to Adoption of Unborn Child ("Unborn Consent"). The prospective adoptive parents may agree to pay for the cost of counseling in a manner consistent with Illinois law, but they are not required to do so.
4. To ask to be involved in choosing your child's prospective adoptive parents and to ask to meet them.
5. To ask your child's prospective adoptive parents any questions that pertain to your decision to place your child with them.
6. To see your child before signing a Consent or Specified Consent.
7. To request contact with your child and/or the child's prospective adoptive parents, with the understanding that any promises regarding contact with your child or receipt of information about the child after signing a Consent, Specified Consent, or Unborn Consent cannot be enforced under Illinois law.
8. To receive copies of all documents that you sign and have those documents provided to you in your preferred language.
9. To request that your identifying information remain confidential, unless required otherwise by Illinois law or court order, and to register with the Illinois Adoption Registry and Medical Information Exchange.
10. To work with an adoption agency or attorney of your choice, or change said agency or attorney, provided you promptly inform all of the parties currently involved.
11. To receive, upon request, a written list of any promised support, financial or otherwise, from your attorney or the attorney for your child's prospective adoptive parents.
12. To delay signing a Consent, Specified Consent, or Unborn Consent if you are not ready to do so.
13. To decline to sign a Consent, Specified Consent, or Unborn Consent even if you have received financial support from the prospective adoptive parents.

If you do not receive any of the rights described in this Form, it shall not be a basis to revoke a Consent, Specified Consent, or Unborn Consent.



As a Birth Parent in the State of Illinois, you have the responsibility:

1. To carefully consider your reasons for choosing adoption.
2. To voluntarily provide all known medical, background, and family information about yourself and your immediate family to your child's prospective adoptive parents or their attorney. For the health of your child, you are strongly encouraged, but not required, to provide all known medical, background, and family history information about yourself and your family to your child's prospective adoptive parents or their attorney.
3. (Birth mothers only) To accurately complete an Affidavit of Identification, which identifies the father of the child when known, with the understanding that a birth mother has a right to decline to identify the birth father.
4. To not accept financial support or reimbursement of pregnancy related expenses simultaneously from more than one source.

JUDGE'S CERTIFICATE FOR ACKNOWLEDGEMENT OF FINAL AND IRREVOCABLE  
CONSENT FOR ADOPTION BY A SPECIFIED PERSON OR PERSONS

STATE OF \_\_\_\_\_ )  
 ) SS  
 COUNTY OF \_\_\_\_\_ )

I, \_\_\_\_\_, \_\_\_\_\_, of \_\_\_\_\_ County,  
 (Name) (Title)

certify that \_\_\_\_\_, personally known to me to be the same person whose name is subscribed to the foregoing Final and Irrevocable Consent for Adoption by a Specified Person or Persons; non-DCFS case, appeared before me this day in person and acknowledged that (she)(he) signed and delivered the consent as (her)(his) free and voluntary act, for the specified purpose. I am further satisfied that, before signing this Consent, \_\_\_\_\_ has read, or has had read to him or her, the Birth Parent Rights and Responsibilities-Private Form.

This consent has been executed and acknowledged in accordance with, and is valid under, the law of the State of Illinois.

In witness whereof, I have hereunto affixed my signature.

Dated: \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Judge

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
\_\_\_\_\_ COUNTY, ILLINOIS

IN THE MATTER OF THE PETITION OF: )  
\_\_\_\_\_ and )  
\_\_\_\_\_, )  
Husband and Wife, )  
TO ADOPT )  
\_\_\_\_\_, )  
A Minor. )

Case No. \_\_\_\_\_ - AD - \_\_\_\_\_

JUDGMENT ORDER FOR ADOPTION

This cause coming on to be heard on the Petition for Adoption, the Answer of the Guardian *ad Litem* of the child sought to be adopted, and the default of the father having been previously entered herein, and

It appearing to the Court that notice for the entry of this Judgment Order has been given to all necessary parties, and

The Court having heard all the evidence and now being fully advised in the premises, FINDS that:

1. It has jurisdiction of the parties to this cause and the subject matter hereof.
2. The Petitioners herein are personally present in open Court.
3. The Petitioners herein are husband and wife, of lawful age, and under no legal disability, and they reside in the City of \_\_\_\_\_, County of \_\_\_\_\_ and State of Illinois. Each of the Petitioners has resided in the State of Illinois for a period in excess of six (6) months immediately preceding the filing of the Petition for Adoption in this cause.
4. The Petitioners desire to adopt \_\_\_\_\_, \_\_\_\_\_ minor child who is about \_\_\_\_\_ years of age and who was born on \_\_\_\_\_, at \_\_\_\_\_, at \_\_\_\_\_, at \_\_\_\_\_. The child is in the custody of and resides with the Petitioners herein.
5. The mother of the child is \_\_\_\_\_, and she is one of the Petitioners in this cause. The father of the child is \_\_\_\_\_, and he is one of the Defendants in this cause.
6. The mother and father were married on \_\_\_\_\_, at \_\_\_\_\_, at \_\_\_\_\_. The mother and father were divorced on \_\_\_\_\_.

7. The mother married \_\_\_\_\_, the male Petitioner herein on \_\_\_\_\_, and the mother has consented to the adoption of the minor, and her consent was evidenced in writing by the mother signing her name to the Petition for Adoption.

8. The father of the child sought to be adopted has abandoned and deserted his child, had he has failed to maintain a reasonable degree of interest, concern, or responsibility as to the welfare of the child. The said father is therefore an unfit person, and his consent to this adoption is not necessary.

9. The Petitioners are reputable persons of good moral character with sufficient ability and financial means to rear, nurture, and educate the said child in a suitable manner.

10. The allegations of the Petition for Adoption are true and proven as therein alleged and it is fit and proper and for the best interests of the minor sought to be adopted that the prayer of the Petition be granted.

IT IS THEREFORE ORDERED that from this date, \_\_\_\_\_, the minor, shall be to all legal intents and purposes the child of the Petitioners, \_\_\_\_\_ and \_\_\_\_\_, husband and wife, and for the purposes of inheritance and all other legal incidents and consequences shall be the same as if she has been born to the Petitioners in lawful wedlock.

IT IS FURTHER ORDERED that the name of the child shall be changed to \_\_\_\_\_.

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

Entered: \_\_\_\_\_  
Judge



## CERTIFICATE OF ADOPTION

### CHILD'S INFORMATION AT BIRTH

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ State file number \_\_\_\_\_

Place of birth  
Hospital, city state and country \_\_\_\_\_

Mother/Co-Parent's name prior to first marriage/civil union \_\_\_\_\_ Father/Co-Parent's name prior to first marriage/civil union \_\_\_\_\_

Male  Female If foreign born, has Illinois previously created a birth record for this child?  Yes  No

Has any U.S. state previously created a birth record for this child?  Yes  No If yes, what state? \_\_\_\_\_

### CHILD'S NAME AFTER ADOPTION

First name(s) \_\_\_\_\_ Middle name(s) \_\_\_\_\_ Last name(s) \_\_\_\_\_

### PARENT'S INFORMATION AFTER ADOPTION

<p><input type="checkbox"/> Co-parent <input type="checkbox"/> Natural father <input type="checkbox"/> Adoptive father <input type="checkbox"/> Single father</p> <p>Married? <input type="checkbox"/> Yes <input type="checkbox"/> No In a Civil Union? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Full name prior to first marriage/civil union _____</p> <p>Date of birth _____</p> <p>Place of birth _____</p> <p>Social Security number _____</p> <p>Current legal name _____</p> <p>Signature of this parent _____</p> <p>By signing this form, you are verifying that all information listed is true and correct.</p>	<p><input type="checkbox"/> Co-parent <input type="checkbox"/> Natural mother <input type="checkbox"/> Adoptive mother <input type="checkbox"/> Single mother</p> <p>Married? <input type="checkbox"/> Yes <input type="checkbox"/> No In a Civil Union? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Full name prior to first marriage/civil union _____</p> <p>Date of birth _____</p> <p>Place of birth _____</p> <p>Social Security number _____</p> <p>Current legal name _____</p> <p>Signature of this parent _____</p> <p>By signing this form, you are verifying that all information listed is true and correct.</p>
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### ADDRESSES

Adoptive parent(s)' address at the time of this child's birth. Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_ County \_\_\_\_\_

Attorney's current mailing address and telephone number \_\_\_\_\_

Adoptive parent(s)' current mailing address and telephone number \_\_\_\_\_

Do you want a new birth certificate created?  Yes  No If yes, send the new birth certificate to  Attorney  Parents

### CERTIFICATION

State of Illinois, County of \_\_\_\_\_ Case Number \_\_\_\_\_ -AD- Decree Date \_\_\_\_\_

I hereby certify that a decree of adoption was entered by the Circuit Court of this county on the above listed date which adjudged that the above mentioned child is deemed to be for legal intents and purposes the child of the adoptive parents identified above.

Date \_\_\_\_\_

COURT SEAL

# ILLINOIS DEPARTMENT OF PUBLIC HEALTH

## Division Of Vital Records

925 E. Ridgely Ave.

Springfield, IL 62702-2737

### CERTIFICATE OF ADOPTION

The certificate of adoption must be completed in its entirety. Failing to complete any portion of this form could result in the document being returned to you without the adoption information being placed on the birth record. The fee for completing the birth record of an Illinois born child is \$15. This includes one certified copy of the new birth certificate. Additional copies ordered at the same time are \$2 each. Make check or money order payable to Illinois Department of Public Health or IDPH.

If you are submitting a certificate of adoption regarding a foreign born child, you must submit one additional document as proof of the child's place and date of birth. Records of foreign birth are \$5 each.

If the adopted child was born in a state other than Illinois, this certificate of adoption will be forwarded to the state of birth.

Please type or print all information clearly. If you have additional questions, call the Division of Vital Records at 217-782-6553. Office hours are 10 a.m. to 3 p.m., Monday through Friday.

#### Child's information at birth

Indicate the child's full name at birth; month, day and year of birth; hospital, city, state and country (if other than the United States) of birth. If the state file number of the birth record is known, indicate so. Provide the full names of the biological mother/co-parent and father/co-parent. Indicate the sex of the child. If you are submitting an adoption regarding a foreign born child, has the state issued a birth record for this child in connection with a prior adoption in Illinois? If you are submitting an adoption regarding a foreign born child, has any state in the United States previously established a birth record for this child? If so, in what state.

#### Child's name after adoption

Indicate in the appropriate space the child's first, middle and last name(s). Do not use white out or line through any part of the new name. If alterations are made, a certified copy of the adoption decree will be required.

#### Parent's information after adoption

Indicate if each parent is a co-parent, natural father, natural mother, adoptive father or adoptive mother, or if this is a single parent adoption. Indicate if each parent is married or in a civil union. Give each parent's first, middle and last name prior to first marriage or civil union. Provide each month, day and year of birth; and the state or country (if other than the United States) of birth for each. Each parent's Social Security number is required; if either parent does not have a Social Security number, please so indicate. Each parent must sign verifying his/her respective information.

#### Addresses

The address of the adoptive parent(s) at the time of the child's birth is required. Provide the complete address including any apartment number, city, state, ZIP code and county. If the biological mother/co-parent is also a parent after adoption, then her address from the original birth record will be placed on the new birth record. The attorney's complete address and telephone number are required. The current address and telephone number of the adoptive parent(s) are also required. Indicate if a new birth record is to be created and to whom it is to be sent.

#### Certification

This must be completed by the circuit clerk's office in the county where the adoption was completed. The circuit clerk must include his/her seal.