

FOR OFFICE USE:

File No.: \_\_\_\_\_  
Date Opened: \_\_\_\_\_  
Date Closed: \_\_\_\_\_

Referred by: \_\_\_\_\_  
Involved Agency: \_\_\_\_\_  
States Involved: Pa & \_\_\_\_\_

**Special Issues/Considerations?** \_\_\_\_\_

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**PENNSYLVANIA ADOPTION CASE CHECKLIST**

**Child's Birth Name:**

Child's adoptive name:

Date Adoptive Parent(s) received child:

Date, time, place of birth:

Child's ethnic background, race and religion:

**Biological Mother** – Name:

Maiden name:

Phone Numbers: (home)

(cell)

work)

Email:

Address:

Date and place of birth:

Religion/Race:

Racial Background / Nationality:

Married/Single/Divorced:

**If divorced, date?**

**If widowed, date?**

Other children (Names/Dates of Birth):

Employment (Name, Address, Phone, Position):

Social Security No :

**Biological Father** – Name:

Phone Numbers: (home)

(cell)

work)

Email:

Address:

Date and place of birth:

Religion/Race:

Racial Background / Nationality:

Married/Single/Divorced:

**If divorced, date?**

**If widowed, date?**

Other children (Names/Dates of Birth):

Employment (Name, Address, Phone, Position):

Social Security No :

**Adoptive Parent (s):**

**Adoptive Mother or Parent #1 Name (including maiden name):**

Phone number: Cell:

Home:

Work:

Email:

Race and Religion:

Ethnic Background and Nationality:

Other children (Name & DOB):

Date and place of Birth:

Social Security No:

Employment (Name, Address, position, and income):

**Adoptive Father or Parent #2 Name: (including maiden name):**

Phone number: Cell:

Home:

Work:

Email:

Date and place of Marriage:

Current address and how long:

Previous address and how long:

Race and Religion:

Ethnic Background and Nationality:

