| Adoption Number   |  |
|-------------------|--|
| Court Case Number |  |

## CONFIDENTIAL POST- PLACEMENT REPORT TO THE COURT

In The Circuit Court of the State of Oregon for the County of (*Name of County*)

REPORT TO THE STATE O F OREGON DEPARTMENT OF HUMAN SERVICES CHILDREN, ADULTS AND FAMILIES

Prepared by (*Name of Agency*)

In the Matter of the Adoption of (*Child's Name*), a Minor

By (Petitioner's Name) and (Petitioner's Name) (Street Address) (City, State, Zip Code)

TO THE HONORABLE (Judge's Name), Judge of the above-entitled court:

A copy of the adoption petition was served on the Director of the Department of Human Services on (*Date of Service*).

#### BIRTH AND LEGAL STATUS OF THE CHILD

According to the adoption petition, (Child's Name), a (male/female) child was born on (Month and Day), (Year), at (City), (State), (Indicate name of hospital) to (Name of Biological Mother), ("a married woman" or "an unmarried woman"), and (Name of Biological Father or "an unmarried father" and whether paternity has been established). Include other clarifying information regarding parentage of the child. State current status of guardianship, including date and court, if applicable.

#### **PLACEMENT**

(Name of the child[ren]) was placed in the home of your petitioners at (address) for the purpose of adoption on (date).

Write two paragraphs, one from the perspective of the biological parents and one from the perspective of the petitioners which summarize the circumstances leading up to the actual

placement. Please include: adoption costs and all other expenses paid by the petitioners; whether the petitioners and birth parents know each other; and indicate if there is any variance between the petitioner's and biological parent's version of the placement.

The Department of Human Services authorized (*Name of Agency*) to conduct and submit an adoption Placement Report to the court.

(Designated Licensed Adoption Agency) respectfully reports that:

1. A Home Study investigation was conducted by (*Name of Licensed Adoption Agency*), prior to filing the adoption petition, which found the prospective adoptive parents meet minimum standards for adoptive homes in accordance with the Department of Human Services' administrative rules and are suitable to become adoptive parents. A COPY OF THE HOME STUDY WAS PREVIOUSLY SUBMITTED TO THE COURT OF GENERAL JURISDICTION AND TO DHS. THUS, THE HOME STUDY, AS PART 1 OF THIS POST-PLACEMENT REPORT, IS NOT INCLUDED IN THIS REPORT.

#### 2. PART II OF THIS REPORT INCLUDES:

- a. Status and adjustment of the child(ren) in the above adoptive home; Status and adjustment of the prospective adoptive parents and other adoptive family members to the child(ren) to be adopted;
- b. Information concerning the biological parents and the child(ren)'s social, medical, and genetic history; and
- c. Recommendation to the court whether the court should grant a decree of adoption.

### PART II

Part II of this confidential report was prepared by: (*Name of the agency and social worker*) after the adoptive placement of: (*Name of the child(ren)* on (*date*) in the home of the petitioners: (*Full names of the petitioners*).

# THE CHILD

Indicate the name of the petitioners have given the child. Write a narrative about the child, including the child's current adjustment in the adoptive home and the adjustment of the adoptive parent(s) (family) to the child. Include child's age; race/ethnicity; current health information; school progress (if appropriate); and development. List any benefits the child is eligible for (Social Security, VA, Indian benefits, etc.). Describe Native American (Indian) heritage, if applicable.

## **BIOLOGICAL PARENTS**

Provide as complete information as possible (in paragraph form for each) concerning the biological mother and biological father including:

- a. Name, date of birth, race, ethnic background. Describe Indian heritage if applicable;
- b. Physical characteristics (height, weight, hair color, eye color, etc);
- c. Educational and employment history;
- d. Family background, marital status, other children (name, sex, and date of birth);
- e. Health information including drug and alcohol use, pregnancy with the child, and extended family health history;
- f. Marriage history including names, divorce dates, and names of former spouses;
- *g.* Reason(s) for relinquishing the child(ren);
- h. Any other relevant information about the birth parents or their families;
- i. If biological parent was not interviewed, explain reasons for not interviewing and describe effort to interview;
- *j.* Any counseling received by the biological parent(s); and
- k. Name of party (attorney/agency) representing biological parent(s). Who explained certificate of irrevocability?

#### BIOLOGICAL PARENT'S ATTITUDE ABOUT THE ADOPTION

State if the biological mother is firm in her decision to release. If she is not firm in her decision, state her concerns. State the biological father's position and involvement in the decision to give this child up for adoption. Are there any unresolved questions regarding consent or relinquishment? Give date(s) consent(s) signed.

## SUMMARY AND RECOMMENDATION

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have been married for (*number*) of years and they are now petitioning to adopt a (*age*) year old (*related/unrelated*) (*male/female*) child." If related, state relationship.

Include one or two paragraphs which summarize significant findings regarding the adoption, i.e., petitioners' parenting ability, family/marital relationships, child's adjustment in the home, health of child, finances, biological parents' attitude regarding this adoption.

## **CONSIDERATIONS**

State any additional information developed during the course of the placement report preparation that the Court should be made aware of. Use this heading only if circumstances exist outside of the topics in the report form.

## RECOMMENDATION TO THE COURT

End the report with a final recommendation such as:

- 1. "In the best interest of the child, a decree granting this adoption is recommended";
- 2. "Granting an adoption decree (is recommended with reservation) (is conditionally recommended) for the following reasons:" (state reasons); or
- 3. "Granting an adoption decree is not recommended for the following reasons." (state reasons)/

#### SIGNATURE AND ACKNOWLEDGMENT

A copy of this report and all documents served on the department will remain permanently on file in the office of the Department of Human Services, or, if appropriate, the Secretary of State, Archives Division. All vital statistics pertinent to the legality of this adoption have not been verified unless otherwise indicated in this report.

This report was approved by (Name of Agency Director/Manager) and prepared by (Name of worker), based upon interviews with (list all persons interviewed and include any other information sources).

| Date_ |  |  |  |
|-------|--|--|--|
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