

ADOPTION CONSENT REQUEST (CHILD IN HOME, NO COMPETING PARTIES)

Department of Human Services

Child's Name (Last, First, Middle)	Date of Birth	DHS Case Number
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Adoptive Placement County	Name of Recommended Adoptive Parent(s)
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Foster Family
 Relative
 Other _____

Date of Placement in the home: _____

EXPEDITED CONSENT REQUEST (All of the following must apply):

- The recommended family is the only family requesting to adopt the child. There are no competing families for adoption.
- The child's is residing in the adoptive home and all of his/her physical and emotional needs are being satisfactorily met.
- This is the only child available for adoption OR all available siblings (i.e. PCW's or MCI wards) are being adopted together.
- Criminal record checks and CPS clearances for all adults in the home are current (see policy) – no arrests or convictions.
- Fingerprinting of adoptive applicants completed. No arrests or convictions.
- The family has no previous complaints, licensing and/or CPS, involving the care of a child.
- Three references recommending the family for adoption of these children have been received.
- There are no "Circumstances Requiring Additional Documentation" as defined in the Adoption Policy CFA 540.
- Marriage and divorce verifications and medical evaluations of the adopting parent(s) are in the case record.

REGULAR CONSENT REQUEST (One or more of the following apply):

- Child is not being placed with other siblings who are available for adoption.
- Family has previous licensing, protective services, or criminal complaints.
- There are other circumstances existing that require additional documentation.

ALL OF THE FOLLOWING ARE REQUIRED FOR EACH CONSENT REQUEST:

- Consent to Adoption (PCA309) is attached which includes:
 - County where petition will be filed, Child's name as it appears on the birth certificate and any documented AKA.
 - Full legal name(s) of the adoptive parent(s) as confirmed by birth, marriage or divorce papers.
- The following required documentation is included and is current within 1 year.
 - Child Assessment and addendum(s) (required to update or indicate changes in placement)
 - Adoptive Family Assessment and addendum(s) with supervisory approval noted.
- Copy of the child's birth certificate or other verification of birth.
- Legal documentation (Copies of at least 1 of the following legal forms must be included)
 - A copy of the Order Terminating Parental Rights, Commitment to DHS (JC63).
 - The applicable legal documents committing a child to DHS following a voluntary release (PCA305, 306, 312, 318, 322)
 - Combination of forms (JC 63, PCA 305, 306, 312, 318, 322), if applicable.
 - Order committing a child to MCI, following a disrupted adoption.

Placement Agency and Address

Signature of Adoption Worker	Date	Telephone Number
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Signature of Adoption Supervisor Approving this Placement	Date
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Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.	AUTHORITY: MCL 710.21 et. seq. and P.A. 280 of 1939. RESPONSE: Required. PENALTY: Adoption delay.
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