



Birth Father's Adoption Plan

Print Name: _____

PREGNANCY AND ADOPTION DECISION

When and how did you first find out that your child's mother was pregnant?

Does anyone in your family know about the pregnancy? Yes ☐ No ☐

If yes, what are the names and relationship to you of those who know of the pregnancy? _____

Does anyone in your family know about the adoption plan? Yes ☐ No ☐

If yes, what are the names and relationship to you of those who know of the adoption plan? _____

Of those family members who know of your adoption plan, do any **oppose** the plan of adoption? Yes ☐ No ☐

If yes, what are the names and relationship to you of those who oppose the adoption plan? _____

Do you currently live with the child's mother? Yes ☐ No ☐

On a scale of 1 to 10 with 1 representing a mild interest/curiosity about the adoption option and 10 representing an absolute resolve to place the baby for adoption, where would you consider yourself to be at this time? _____

Describe your feelings and the reasons why you are placing the child for adoption:

What plan, other than adoption, have you considered for this child?

Explain the type of home and family you want for your child: _____

Have you ever worked with or been represented by a lawyer, adoption agency or facilitator other than your current adoption attorney and/or adoption agency? If so, please list the name, address and phone number of the person(s) or entity you worked with and the dates you worked with them:

HOSPITAL & BIRTH PLANS

Do you want to know the sex of the baby? Yes ☐ No ☐

Do you want to see the baby in the hospital? Yes ☐ No ☐

Do you want to hold the baby in the hospital? Yes ☐ No ☐

Do you want counseling either before or after the birth of the baby? Yes ☐ No ☐

Do you want any pre- or post-birth education? Yes ☐ No ☐

Would you like us to meet with your parents, siblings, or any other person to discuss your adoption plan and the adoption process? Yes ☐ No ☐

If so, please identify _____

INFORMATION ABOUT ADOPTIVE FAMILY

How and when did you locate or become aware of the adoptive parent(s)?

Describe your reasons for choosing or supporting placement with these particular adoptive parent(s)

If an agency or another person introduced you to or gave you information about the adoptive parent(s), give their name and address and details of how the placement was arranged

Have you met the adoptive parent(s)? Yes ☐ No ☐

If not, do you want to meet them prior to placement? Yes ☐ No ☐

Do you want to meet them at the time of placement? Yes ☐ No ☐

Do you know the full name(s) of the adoptive parent(s)? Yes ☐ No ☐

Do you know the address or area of residence of the adoptive parent(s)? Yes ☐ No ☐

Do you know the age(s) of the adoptive parent(s)? Yes ☐ No ☐

Do you know the religion of the adoptive parent(s)? Yes ☐ No ☐

Do you know the race or ethnicity of the adoptive parent(s)? Yes ☐ No ☐

Do you know the length of current marriage of the adoptive parent(s)? Yes ☐ No ☐

Do you know the number of previous marriages of the adoptive parent(s)? Yes ☐ No ☐

Do you know the employment of the adoptive parent(s)? Yes ☐ No ☐

Do you know whether other children or adults live in the home of the adoptive parent(s)?

Yes ☐ No ☐

Do you know whether the adoptive parent(s) have any other children who do not reside in their home? Yes ☐ No ☐

Do you know whether the adoptive parent(s) is/are meeting his/her child support obligations for minor children no in their home? Yes ☐ No ☐

Do you know whether the adoptive parent(s) have any health conditions that may shorten their life expectancy or curtail normal daily activities? Yes ☐ No ☐

Do you know whether the adoptive parent(s) have been convicted of any crimes other than minor traffic violations? Yes ☐ No ☐

Do you know whether any child of the adoptive parent(s) has ever been removed due to allegations of child abuse or neglect against him/her/them? Yes ☐ No ☐

Do you have preference regarding the religious practice of the adoptive family for your child?

Yes ☐ No ☐

If yes, please specify what religion you prefer _____

Would you object to your child being placed with a family whose religion is different from your own? Yes ☐ No ☐

Is there additional information you want about the adoptive parents? Yes ☐ No ☐

If yes, please specify _____

Knowing all of the above information about the adoptive parent(s), do you still want them to adopt your child? Yes ☐ No ☐ Uncertain ☐

Have the adoptive parent(s) or anyone acting on their behalf (agency, attorney, facilitator) paid or offered to pay directly to you or indirectly to a third party (landlord, creditor, doctor, hospital, attorney, agency, facilitator) any money or thing of value?

Yes ☐ No ☐ If yes, please give details of who paid, how much, recipient and purpose:

CONTACT WITH THE ADOPTIVE FAMILY OR CHILD AFTER ADOPTION

What are your hopes and wishes for the child's future?

Do you want pictures/letters from the family after the adoption? Yes ☐ No ☐ Undecided ☐

If yes, how often and for how long? _____

Do you want other or additional contact with the child after adoption?

If yes, describe _____

Is there any additional information about yourself or any member of your family that you would like the adoptive family and/or your child to know, or any characteristics or preferences you would like to see in an adoptive family?

What is your current feeling about being contacted by the child when he/she is an adult?

Do you authorize your attorney and/or us to disclose your name, address and phone number to the adoptive parents?

Please initial: Yes _____ No _____

The above information is true to the best of my knowledge and belief

Signature

Date