Application Package for Processing a Private Adoption

To adopt a child in the province of Alberta, you must meet the Alberta adoption regulations.
Eligibility includes being an Alberta resident, at least 18 years of age and able to demonstrate financial and domestic stability.

To Private Adoption Applicants:

Whether your adoption is a relative, private direct or spousal adoption, you now have the option of filing your adoption yourself using a Self-help Kit which can be purchased through King's Printers at https://www.alberta.ca/private-adoption.aspx or by having us assist you with that process.

While social media and online platforms like Facebook may seem like easy ways to connect, only a licensed adoption agency in Alberta is legally authorized to facilitate or advertise an adoption.

Private adoptions (also called direct placement, stepparent, or relative adoptions) are limited to situations where there is an existing relationship between the birth and adoptive families.

You may use this process if:

- You are adopting the child of your spouse or a relative (e.g., a grandchild, niece, nephew, great-niece, or great-nephew).
- There is a privately made agreement between birth and adoptive families who already know each other and are making their own arrangements.

For all other situations, adoption must be facilitated through a licensed adoption agency such as Adoption Options.
Alberta legislation does not require a homestudy from you. However, the Justice could decide that they would like to see a homestudy before granting the adoption. Several other documents are required as part of the adoption application. Ensuring compliance with adoption regulations is mandatory as set out in the Child, Youth and Family Enhancement Act.

Furthermore, the birthparent or other legal guardian has a right to see a homestudy, criminal record checks and child intervention checks on the adoption applicant(s). If they decide that they want to exercise that right, the consent will not be signed until a homestudy is completed and that process takes approximately three months. Also, be aware that if you are adopting from another province or territory you will have to comply with their legislation and most of them require a homestudy BEFORE the child can be placed with you.

Enclosed is information about how we can help you with this process, what we will need and what we can do for you. If you would like to discuss your situation, please call to arrange an initial consultation with one of our social workers (see fee schedule enclosed).

Sincerely,

Sheryl Proulx, BSW, RSW Executive Director
www.adoptionoptions.com

WHAT YOU NEED TO PROVIDE

1. Documents to complete and return to us

- ☐ Application for Private Direct/Spousal Adoption
- ☐ Contract
- ☐ Criminal Record Checks (no more than 6 months old)
- ☐ Statement of Petitioner

2. Documents to gather and submit to us

- ☐ Notarized or original Marriage certificate (see instructions) **If applicable*.
- ☐ Photocopy of your birth certificates / **if not married, then original or notarized copy.*
- ☐ Photocopy of child's birth certificate if you have one
- ☐ Original of Consent(s) by Guardian to Adoption
  - Three different forms are enclosed. Be sure to use the right one for your situation. If this is a private direct adoption (not spousal or step-parent adoption), the consent must be done before a lawyer. We can help with a referral.
- ☐ Original or certified copy of court orders regarding custody or access to this child (if there are any)
- ☐ Affidavit of Birthmother – we can help with this.
- ☐ Original access agreement (written or verbal)
- ☐ Child's family and medical history form (completed by birthparents or legal guardians)

Note that any of the above documents that are not in English will have to be officially translated. Ask us how to go about that.

3. Documents which we will prepare

- ☐ Application for Adoption Order
- ☐ Affidavit of Applicant(s)
- ☐ Adoption Order
- ☐ Adoption Information
- ☐ Registration of A Birth

4. Services which we will provide

- ☐ In person and telephone assistance throughout the process.
- ☐ We will complete your adoption package and file it in court on your behalf.
- ☐ We will provide you with a copy of the documents and serve those documents on Alberta Children's Services and the birthparents unless you choose to do that yourselves.
- ➢ A final statement outlining the fees you have paid, as the expenses of an adoption are now tax-deductible for the tax year in which the adoption was finalized.

Documents may be returned to:

Adoption Options Edmonton
Unit 6, 9363 – 50 Street
Edmonton, Alberta
T6B 2L5

Adoption Options Calgary
Unit 207, 5940 Macleod Trail South
Calgary, Alberta
T2H 2G4

FEE SCHEDULE

Initial consultation (due day of meeting with the social worker) $ 250

This includes learning about your situation, offering in-person process information and review of application.

Assistance with the preparation of the required court documents $1,000

This includes preparing all of the legal documents. Additional meetings, telephone calls, e-mails, etc. It might also include efforts to track down and/or complete required documents including contacting the birthparent if necessary to complete affidavits and medical/social history, birthfather notice/status, documents addressing Indigenous heritage, and contact agreement.

Registration of Birth *If we need to order one on your behalf.	$ 50
Filing of court documents	$2,450
Service of court documents on all parties	$ 150
Total	**$3,900**
Preparation and filing documents of each additional child	$1,800

OPTIONAL SERVICES and possible fees

Counselling for birthparents	$150/hour
Home Assessment Report (if required by judge, birthparent or other jurisdiction)	$3,750*

There would also be mileage and travel time, etc. for a visit to your home.

.60/km and $40/hour travel time

Participation in an adoption seminar $1,500

Families who choose to complete a homestudy and participate in Adoption Options' seminar could then apply as a re-entry to our agency for a subsequent adoption placement.

The **full fee is required at the outset** by e-transfer to aoedm@adoptionoptions.com or VISA or MasterCard. Exact cash or Debit available in office during office hours. Disbursements, if any, will be billed as needed.

Refunds - For our refund policy. Please read the contract carefully; enclosed within this package and part of the application package.

Receipts - Receipts are issued via email once the payment has been processed. Once the adoption is finalized, we will send you an itemized statement showing all fees paid. A copy of this goes to Alberta Children and Family Services. This statement will be your receipt for income tax purposes, as some adoption fees can be claimed for the tax year in which the adoption was finalized.

Fees shown are reviewed annually and are subject to change without notice. Increases will not be applied retroactively. As Adoption Options is a registered charity, we are not required to charge applicants GST.

PRIVATE DIRECT ADOPTION APPLICATION PART I

ADOPTIVE PARENTS' INFORMATION (Please Print)

Full **Legal** Names as they will appear on documentation for Court of King's Bench
(Please compare your birth and marriage certificated for accuracy; if they differ, please provide an explanation)

_____
APPLICANT ONE, NAME IN FULL

_____
APPLICANT TWO, NAME IN FULL

_____
Maiden Name

_____
Address

_____ _____
City Postal Code

_____ _____
Home Phone Cell Phone(s)

_____
Email Address

☐ We wish to receive emails from Adoption Options such as the newsletter, agency happenings and other adoption-related information (please check if you wish to be included on our email list).

	Applicant One	**Applicant Two**
Work Phone:	_____	__
Date of Birth:	_____	__
Place of Birth:	_____	__

Marital Status of Applicants:

☐ Single - please include original or notarized birth certificates for each applicant.

☐ Married - please include an original or notarized copy of your marriage certificate and photocopies of each of birth certificates for each applicant.

☐ Interdependent adult relationship - please include original or notarized birth certificates for each applicant.

☐ Other: please explain _____

Please note that if birth and/or marriage certificates are not in English you must have them translated into English, to be acceptable to the Court.

Certificates provided to the Agency will NOT be returned to you as they are filed as part of the Court required documentation.

Does the child have **any amount** of Indigenous Heritage?

☐ No

☐ Yes. If your child has **any amount** of Indigenous heritage, you must complete a Cultural Connection Plan, which will be filed with your Adoption Application. This form is included in this package. This is not an optional form. Without this form the Clerk of the Court will not file the adoption; if the adoption is not filed, it cannot be granted.

Are there any custody or guardianship orders regarding the child?

☐ No

☐ Yes, please include the original or a notarized copy.

Do you have a verbal agreement with the birthparents / legal guardians regarding access to the child (eg. exchanging letters and pictures, E-mails, telephone calls, visits, etc.)?

☐ No

☐ Yes, a verbal agreement exists and that agreement states (please include your understanding of the agreement here):

_____

_____

Do you have a written agreement with the birthparents / legal guardians regarding access to the child?

☐ No, a written agreement does not exist.

☐ Yes, a written agreement exists and the original (or a notarized copy) is attached.

Applicant 1	**Applicant 2**
Are you a Stepparent to the child? ☐ No ☐ Yes	Are you a Stepparent to the child? ☐ No ☐ Yes
Are you a Birthparent to the child? ☐ No ☐ Yes	Are you a Birthparent to the child? ☐ No ☐ Yes
Are you related to the child? ☐ No ☐ Yes If yes explain:	Are you related to the child? ☐ No ☐ Yes If yes explain:

Is there an agreement for you to pay or give any consideration as an Applicant?

☐ No ☐ Yes If yes, please explain:_____

BIRTHPARENT INFORMATION

(Please print)

Birthmother Information

Full Legal Name: _____

Address: _____

Phone: _____

Date of Birth: _____ Place of Birth: _____

Birthfather Information

Full Legal Name: _____

Address: _____

Phone: _____

Date of Birth: _____ Place of Birth: _____

Were the birthparents married to each other when this child was born?

☐ No

☐ Yes If yes, when did the marriage end?_____(month / year)

CHILD'S INFORMATION (Please print)

Name of Child at Birth: _____

Date of Birth: _____

Hospital of Birth: _____

Place of Birth: _____

The child is ☐ Male ☐ Female

NEW NAME OF CHILD: _____

Please explain how the Child came to be placed in the home of the Applicants:

_____

_____

_____

CONTRACT WITH ADOPTION OPTIONS

Name of Applicant One: _____

Name of Applicant Two: _____

Address: _____

City: _____Postal Code: _____

Telephone: home _____

Applicant One: work _____cell _____

Applicant Two: work _____cell _____

E-Mail: _____

I/WE UNDERSTAND IN MAKING THIS APPLICATION THAT:

1. I /We are entering into an agreement to have Adoption Options assist me/us to prepare and file the court documents for our private adoption.

2. I/We agree to pay for the consultation fee, preparation fees, and court filing as outlined in the fee schedule included in the information package. I/We understand that these fees are due at time of contracting with Adoption Options to file the adoption application. I/We also understand that these fees are non-refundable once application has been processed.

3. Adoption Options will be collecting personal information from us as required by Regulation in order to file our adoption application. We will provide full and complete disclosure of all information relevant to this process and know that these items will be sent to court as part of our application.

_____	_____
Signature of Applicant One	Signature of Applicant Two
_____	_____
Date	Date

Request for Criminal Record Check

Pursuant to S.6(2)(d), the Adoption Regulation requires us to obtain a Criminal Record Check with Vulnerable Sector Search for each applicant applying for adoption, and for any other adults over 18 years old living in their home. These checks must be dated within 6 months of starting your homestudy and must be renewed every two years while you wait for the placement of a child.

INSTRUCTIONS:

1. Apply for a Criminal Record Check WITH VULNERABLE SECTOR at your local Police Agency or RCMP detachment.

2. You MUST identify that the purpose of your Criminal Record Check is for ADOPTION.

   *Some jurisdictions will complete a Criminal Record Check WITH Vulnerable Sector for adoptive parents, and some will not.

   **If your local authority cannot provide a vulnerable sector for purpose of adoption, you MUST request Fingerprinting. If you reside in the City of Edmonton, fingerprinting can only be completed in person at the Nexus Business Park at #108, 14315-118 Avenue.

3. Once you have received the required documents for all adults living in your home, please provide the originals to our office.

Note: It is up to you, the applicant, to ensure that you are following the correct Criminal Record Check application process for the jurisdiction in which you live in.

STATEMENT OF PETITIONER

Prepare a *Statement of Petitioner* that describes the kind of activities you and the child do together. How you know the child and why you are applying to adopt the child. You can write your statement as a letter to the Court. Make sure that all applicants or adopting parents sign the letter and print your name(s) underneath your signature(s).

E.g.

To the Justice of the Court of King's Bench:

Yours truly,

Mary Jane Smith

John David Smith

****We are happy to help with this statement.*

OTHER DOCUMENTS

1) Marriage Certificate -- This certificate is to be a document that is issued by the Division of Vital Statistics or a similar Bureau or Registry. This document may be a notarized copy. Any size certificate is acceptable, however, we prefer the framing size. This document is also acceptable if it is a notarized copy. **DO NOT SEND YOUR CHURCH CERTIFICATE.**

   ****If you have experienced a divorce, we require an original or notarized copy of your Divorce Certificate.**

2) Death Certificate -- Issued by the Division of Vital Statistics or similar Bureau or Registry. These should be notarized copies or copies that have been certified by the Bureau.

3) Change of Name Certificate -- This document should be one that is issued by the Division of Vital Statistics or similar Bureau or Registry.

PLEASE NOTE THAT none of these documents will be returned to you as they are filed in court with the adoption application.

If your marriage took place in Alberta, you can order an original marriage certificate from one of the private registry agents. (Sample below)

If any of the above certificates are written in another language, we will require an English translation for the court.

Please give this letter to the lawyer doing the consent with the birthparent.

Memo: To Lawyer
From: Adoption Options

RE: PRIVATE DIRECT PLACEMENTS

To meet Alberta's legislative requirements the consent must be done on government regulated form CS3598 (2004/11) [or CS2659 (2004/11) for a step-parent adoption] if the birthparent resides in Alberta. If the birthparents are in another jurisdiction in Canada, you may use the consent form of that jurisdiction.

In order to file this adoption in court, the adoptive parent(s) should also have an affidavit done by the birthmother addressing a number of issues. The following page describes what the contents of that affidavit should include, according to the Child, Youth and Family Enhancement Act.

Note that if the birthmother does not know who the birthfather is, she must swear an affidavit outlining the reason she does not know and give particulars. The Court does not accept a statement of "unknown".

Finally, under Alberta's Family Law Act, the consent of the birthfather may also be required if considered to be a legal guardian. If he is part of the process or is named and available and willing, please obtain his consent as well. A birthfather must be informed of an adoption and depending on the situation, may be required to be served with the adoption application.

Thank you for providing the appropriate legal documentation to enable us to process this adoption without difficulties.

AFFIDAVIT OF BIRTHMOTHER

The Affidavit of Birthmother is a required document for filing a private direct adoption. This document must be thoughtfully completed by the birthmother with either one of our social workers, who is a commissioner of oaths or with a lawyer.

This affidavit should attempt to address all the issues that the court needs to have covered:

- what is the birthmother's name, address and occupation,
- is she married, or has she lived common law,
- does she have an adult interdependent partner relationship,
- who is the birthfather,
- if she cannot or won't name him, there needs to be a full explanation of the circumstances,
- what is her relationship with the birthfather,
- are there any other possible guardians,
- is there any Indigenous heritage,
- is there any agreement to receive payment or consideration,
- is there a written or verbal agreement for ongoing contact or access,
- how did she come to place her baby in this home / choose this home to place her baby,
- and where there is no likelihood of finding this birthfather or of having his consent, this affidavit serves as a supporting affidavit to dispense with his service and consent.

The birthmother will need to complete the following on the affidavit regarding her relationship with the prospective birthfather.

The mother and the father of this child are both guardians of the child because (check all that are applicable)

- ☐ we were married to each other at the time of the birth of the child.
- ☐ we were married to each other and the marriage was terminated by:
  a degree of nullity of marriage granted less than 300 days before the birth of the child, or a judgement of divorce granted less than 300 days before the birth of the child.
- ☐ we were married to each other after the birth of the child.
- ☐ we cohabitated with each other for 12 consecutive months during which time the child was born, or
- ☐ we were each other's adult interdependent partners at the time of the birth of the child or became each other's adult interdependent partner after the birth of the child.
- ☐ the other party has been voluntarily providing or offering to provide reasonable direct or indirect support, other than pursuant to a court order for the child.

- ☐ the other party has been providing or offering to provide reasonable direct or indirect financial or other support, other than pursuant to a court order, for me during or after the pregnancy,
- ☐ there are other circumstances that a court will find demonstrates the parent's intention to assume responsibility of a guardian in respect of the child [specify]

If you are seeking the assistance of a lawyer to complete this, please take this page to the lawyer who will be doing consents with the birthparents and ask him/her/them to also complete a Birthmother Affidavit with the birthmother of the child.

A sample of the Affidavit of Birthmother is included in this package and in the Self-Help Kit provided through the King's Printer.

All the best,

Adoption Options

Protected B (when completed)

Consent by a Guardian to Adoption

Adoption of a Child Under Permanent Guardianship or Step-Parent Adoption

COURT FILE NUMBER _____

COURT OF KING'S BENCH OF ALBERTA

JUDICIAL CENTRE - Select one -

GUARDIAN _____

ADDRESS _____

DOCUMENT **CONSENT BY A GUARDIAN TO ADOPTION**

ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT _____

CHILD TO BE ADOPTED: *(full name of child to be adopted, as on birth document)* _____

DATE OF BIRTH: yyyy-mm-dd _____

BIRTH REGISTRATION NUMBER: _____

1. Consent

My name is _____ .
name

My address is _____ .
address

I know that _____
name(s) of adopting parent(s)

of _____
full mailing address

are applying to the Court for an adoption order regarding this child.

- I understand what an adoption order means.
- I understand that, unless I am the spouse or interdependent partner of the applicant, the order will end all my rights and responsibilities regarding the child.

◯ I am a guardian of the child. I understand that once I sign this consent the applicant(s) become joint guardians of the child with me until an adoption order is granted.

OR ◯ I was a guardian before the applicant became the sole guardian of the child.

◯ I want to be served with the adoption application. **OR** ◯ I do not want to be served with the adoption application.

◯ I want to be served with a Notice of Adoption Hearing (if a hearing is held because another party filed a Notice of Objection). **OR** ◯ I do not want to be served with a Notice of Adoption Hearing.

- I consent to the adoption order.
- I understand that I may cancel this consent within 10 days of my signing it by giving a written notice to a caseworker (these can be provided in person or by fax to Adoption and Permanency Services at 780-427-2048).

_____ Guardian's name (please print)

_____ Signature of Guardian

_____ Witness's name (please print)

_____ Signature of Witness

_____ date yyyy-mm-dd

2. Affidavit of Execution

My name is _____ .
name of witness

My address is _____ .
full address

I make oath and say:

I witnessed the guardian sign this consent form. _____
Signature of Witness

Sworn before me at _____ ,
city or town

in the province of Alberta on _____ .
date yyyy-mm-dd

_____
Signature of Notary Public, Commissioner for Oaths
in and for the Province of Alberta

Stamp of Commissioner for Oaths

Protected B (when completed)

Consent by a Guardian to Adoption

Adoption of a Child Under Permanent Guardianship or Step-Parent Adoption

COURT FILE NUMBER _____

COURT OF KING'S BENCH OF ALBERTA

JUDICIAL CENTRE - Select one -

GUARDIAN _____

ADDRESS _____

DOCUMENT **CONSENT BY A GUARDIAN TO ADOPTION**

ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT _____

CHILD TO BE ADOPTED: *(full name of child to be adopted, as on birth document)* _____

DATE OF BIRTH: yyyy-mm-dd _____

BIRTH REGISTRATION NUMBER: _____

1. Consent

My name is _____ .
name

My address is _____ .
address

I know that _____
name(s) of adopting parent(s)

of _____
full mailing address

are applying to the Court for an adoption order regarding this child.

- I understand what an adoption order means.
- I understand that, unless I am the spouse or interdependent partner of the applicant, the order will end all my rights and responsibilities regarding the child.

◯ I am a guardian of the child. I understand that once I sign this consent the applicant(s) become joint guardians of the child with me until an adoption order is granted.

OR ◯ I was a guardian before the applicant became the sole guardian of the child.

◯ I want to be served with the adoption application. **OR** ◯ I do not want to be served with the adoption application.

◯ I want to be served with a Notice of Adoption Hearing (if a hearing is held because another party filed a Notice of Objection). **OR** ◯ I do not want to be served with a Notice of Adoption Hearing.

- I consent to the adoption order.
- I understand that I may cancel this consent within 10 days of my signing it by giving a written notice to a caseworker (these can be provided in person or by fax to Adoption and Permanency Services at 780-427-2048).

_____ Guardian's name (please print)

_____ Signature of Guardian

_____ Witness's name (please print)

_____ Signature of Witness

_____ date yyyy-mm-dd

2. Affidavit of Execution

My name is _____ .
name of witness

My address is _____ .
full address

I make oath and say:

I witnessed the guardian sign this consent form. _____
Signature of Witness

Sworn before me at _____ ,
city or town

in the province of Alberta on _____ .
date yyyy-mm-dd

_____
Signature of Notary Public, Commissioner for Oaths
in and for the Province of Alberta

Stamp of Commissioner for Oaths

◯ I am a guardian of the child. I understand that once I sign this consent the applicant(s) become joint guardians of the child with me until an adoption order is granted.

OR ◯ I was a guardian before the applicant became the sole guardian of the child.

◯ I want to be served with the adoption application.

OR ◯ I do not want to be served with the adoption application.

◯ I want to be served with a Notice of Adoption Hearing (if a hearing is held because another party filed a Notice of Objection).

OR ◯ I do not want to be served with a Notice of Adoption Hearing.

I choose to place my children for adoption directly with _____
name(s) of adopting parent(s)

who is(are) personally known to me. I further understand that before I sign this consent, I may request and review:

- **a home study report prepared by a qualified person;**
- **a cultural connection plan, if the child is Indigenous;**
- **the results of a criminal record check, including a vulnerable sector search;**
- **the results of an intervention record check;**

◯ I do not want to review the documents listed. **OR** ◯ I have reviewed the documents.

- Consent to the adoption order.
- I understand that I may cancel this consent within 10 days of signing it by giving a written notice to a caseworker (these can be provided in person or by fax to Adoption and Permanency Services at 780-427-2048).

Name of Guardian	Date yyyy-mm-dd	Signature
Name of Director's Delegate or Lawyer	Date yyyy-mm-dd	Signature

2. Affidavit of Execution of a Director or a Lawyer

My name is _____ .
director's delegate or lawyer's name in full

My address is _____ .
business address

I make oath and say: ◯ I have the authority to act for a director. **OR** ◯ I am a lawyer.

a. I am satisfied that:

- the guardian has the capability to understand and appreciate the nature and consequences of the consent;
- the guardian is informed about the nature and consequences of the consent;
- the consent represents what the guardian wants.

b. I have advised the guardian that before signing this consent, the guardian may request that the adopting parents provide the guardian with following:.

- a home study report prepared by a qualified person;
- a cultural connection plan, if the child is Indigenous;
- the results of a criminal record check, including a vulnerable sector search;
- the results of an intervention record check.

c. I witnessed the guardian sign this consent form.

SWORN BEFORE ME at the City of _____, in the Province of Alberta, this _____ day of _____, 20

Commissioner for Oaths Stamp

_____.

Signature of director's Delegate or Lawyer

_____

Signature of Notary Public, Commissioner for Oaths in and for Alberta

Consent by a Guardian to Adoption

Adoption of a Child Placed Directly by the Parent

COURT FILE NUMBER _____

COURT OF KING'S BENCH OF ALBERTA

JUDICIAL CENTRE - Select one -

GUARDIAN _____

ADDRESS _____

DOCUMENT **CONSENT BY A GUARDIAN TO ADOPTION**

ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT _____

CHILD TO BE ADOPTED: *(full name of child to be adopted, as on birth document)* _____

DATE OF BIRTH: yyyy-mm-dd _____

BIRTH REGISTRATION NUMBER: _____

1. Consent

My name is _____.
name in full

My address is _____.
full mailing address

I know that _____
name(s) of adopting parent(s) in full

of _____
full mailing address

are applying to the Court for an adoption order regarding this child.

- A caseworker/lawyer has explained to me what an adoption order means.
- I understand that the order will end all my rights and responsibilities regarding the child.

I have been told about the options available to me for planning for the child and I know I can get counselling regarding the following options:

- I may choose to parent the child.
- I may choose to place the child for adoption directly with a family member, or any other person known to me.
- I may choose to place the child for adoption using the services of a licensed adoption agency.

- I may choose to place the child for adoption using the services of Children and Family Services.

◯ I am a guardian of the child. I understand that once I sign this consent the applicant(s) become joint guardians of the child with me until an adoption order is granted. **OR** ◯ I was a guardian before the applicant became the sole guardian of the child.

◯ I want to be served with the adoption application. **OR** ◯ I do not want to be served with the adoption application.

◯ I want to be served with a Notice of Adoption Hearing (if a hearing is held because another party filed a Notice of Objection). **OR** ◯ I do not want to be served with a Notice of Adoption Hearing.

I choose to place my children for adoption directly with _____
name(s) of adopting parent(s)

who is(are) personally known to me. I further understand that before I sign this consent, I may request and review:

- **a home study report prepared by a qualified person;**
- **a cultural connection plan, if the child is Indigenous;**
- **the results of a criminal record check, including a vulnerable sector search;**
- **the results of an intervention record check;**

◯ I do not want to review the documents listed. **OR** ◯ I have reviewed the documents.

- Consent to the adoption order.
- I understand that I may cancel this consent within 10 days of signing it by giving a written notice to a caseworker (these can be provided in person or by fax to Adoption and Permanency Services at 780-427-2048).

Name of Guardian	Date yyyy-mm-dd	Signature
Name of Director's Delegate or Lawyer	Date yyyy-mm-dd	Signature

2. Affidavit of Execution of a Director or a Lawyer

My name is _____ .
director's delegate or lawyer's name in full

My address is _____ .
business address

I make oath and say: ◯ I have the authority to act for a director. **OR** ◯ I am a lawyer.

a. I am satisfied that:

- the guardian has the capability to understand and appreciate the nature and consequences of the consent;
- the guardian is informed about the nature and consequences of the consent;
- the consent represents what the guardian wants.

b. I have advised the guardian that before signing this consent, the guardian may request that the adopting parents provide the guardian with following:.

- a home study report prepared by a qualified person;
- a cultural connection plan, if the child is Indigenous;
- the results of a criminal record check, including a vulnerable sector search;
- the results of an intervention record check.

c. I witnessed the guardian sign this consent form.

SWORN BEFORE ME at the City of _____, in the Province of Alberta, this _____ day of _____, 20

Commissioner for Oaths Stamp

_____.

Signature of director's Delegate or Lawyer

_____

Signature of Notary Public, Commissioner for Oaths in and for Alberta

Protected B (when completed)

Consent by a Child to Adoption

Adoption of a Child 12 Years of Age or Older

COURT FILE NUMBER _____

COURT OF KING'S BENCH OF ALBERTA

JUDICIAL CENTRE - Select one -

APPLICANT(S) _____

DOCUMENT **CONSENT BY A CHILD TO ADOPTION**

ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT _____

CHILD TO BE ADOPTED: *(full name of child to be adopted, as on birth document)* _____

DATE OF BIRTH: yyyy-mm-dd _____

BIRTH REGISTRATION NUMBER: _____

1. Consent

My name is _____ .
name

I know that _____
name(s) of adopting parent(s)

of _____
full mailing address

are applying to the Court for an adoption order about me.

1. I understand what an adoption order means.
2. I consent to the adoption order.

☐ I consent to have my name changed to _____ .
name

Child's name (please print)	date yyyy-mm-dd	Signature of Child

Director's Delegate or Lawyer's name (please print)	date yyyy-mm-dd	Signature of Director's Delegate or Lawyer

2. Affidavit of Execution of a Director or a Lawyer

My name is _____ .
director's delegate or lawyer's name

My address is _____ .
business address

I make oath and say: ◯ I have the authority to act for a director. **OR** ◯ I am a lawyer.

1. I am satisfied that:

- the child has the capability to understand and appreciate the nature and consequences of the consent;
- the child is informed about the nature and consequences of the consent; and
- the consent represents what the child wants.

2. I witnessed the child sign this consent form.

_____
Signature of Director's Delegate or Lawyer

Sworn before me at _____ ,
city or town

in the province of Alberta on _____ .
date yyyy-mm-dd

_____
Signature of Notary Public, Commissioner for Oaths
in and for the Province of Albert

Stamp of Commissioner for Oaths

Alberta

Family Medical History

Section 1: Child's Information

A.

Last Name of Child | First Name of Child | Middle Name of Child | Date of Birth: Year | Month | Day

Gender: ◯ Female ◯ Male

Birthplace | Time of Birth (if known)

Religion | Has child been confirmed in child's faith? ◯ Yes ◯ No ◯ Unknown | If yes, give details

Racial Origin | Ethnic Origin

If Registered First Nation Individual (Registration Number) ☐ or Not Applicable | Band Name | Band Number

If Métis (Métis settlement name or community)

Physical description of child.

Diagnosed birth or congenital health problems of child.

B. Background (if newborn do not complete)

Provide any information regarding where the child has lived, who parented the child, etc.

Describe relationship with family or other significant persons.

C. Development (if newborn do not complete)

Discuss academic achievement and social adjustment to school.

Describe any interests, hobbies or participation in sports.

Provide copies of any psychological or psychiatric assessments which have been completed.
Provide any known information regarding the child's emotional, social, developmental or cognitive functioning.

D. **Personality** (if newborn do not complete)

Discuss child's personality and behaviour.

Section 2: Birth Mother's or Birthing Parent's Information

Last Name of Mother | First Name of Mother | Middle Name of Mother | Date of Birth: Year | Month | Day

Street Address | City or Town | Province | Postal Code

Birthplace | Religion

Racial Origin | Ethnic Origin

If Registered First Nation Individual (Registration Number) ☐ or Not Applicable | Band Name | Band Number

If Métis (Métis settlement name or community)

Marital/Adult Interdependent Relationship Status | Physical Description: Height | Weight | Colour of Eyes | Colour of Hair

Any unique features

Education

Employment

Interests

Personality

Relationship with family

Other Children Born to Birth Mother

Last Name | First Name | Middle Name | Date of Birth: Year | Month | Day | Gender: ◯ Female ◯ Male | + | -

Who is caring for these children?

Birth Mother's parents, brothers and sisters

Last Name | First Name | Middle Name | Date of Birth: Year | Month | Day | Gender: ◯ Female ◯ Male | + | -

Describe any special talents, skills, traits within the family.

Additional comments of birth mother.

Date yyyy-mm-dd | Signature of Birth Mother

Section 3: Birth Mother's Medical Information

Describe the mother's general state of health.

Describe physical, mental, emotional or medical conditions.

Describe any treatment obtained for the conditions described above.

Describe extent of use of any drugs, alcohol or tobacco (including prenatal use).

Describe prenatal care received by mother.

Describe any significant physical, mental, emotional or medical conditions within the extended family and any treatment obtained.

Section 4: Birth Father's Information

Last Name of Father | First Name of Father | Middle Name of Father | Date of Birth: Year | Month | Day

Street Address | City or Town | Province | Postal Code

Birthplace | Religion

Racial Origin | Ethnic Origin

If Registered First Nation Individual (Registration Number) ☐ or Not Applicable | Band Name | Band Number

If Métis (Métis settlement name or community)

Marital/Adult Interdependent Relationship Status | Physical Description: Height | Weight | Colour of Eyes | Colour of Hair

Any unique features

Education

Employment

Interests

Personality

Relationship with family

Other Children Born to Birth Father

Last Name | First Name | Middle Name | Date of Birth: Year | Month | Day | Gender: ◯ Female ◯ Male | + -

Who is caring for these children?

Birth Father's parents, brothers and sisters

Last Name | First Name | Middle Name | Date of Birth: Year | Month | Day | Gender: ◯ Female ◯ Male | + -

Describe any special talents, skills, traits within the family.

Additional comments of birth father.

Date yyyy-mm-dd

Signature of Birth Father

Section 5: Birth Father's Medical Information

Describe the father's general state of health.

Describe physical, mental, emotional or medical conditions.

Describe any treatment obtained for the conditions described above.

Describe extent of use of any drugs, alcohol or tobacco.

Describe any significant physical, mental, emotional or medical conditions within the extended family and any treatment obtained.

Section 6: Adoption Information

Describe the relationship between the birth parents.

Describe the circumstances surrounding the decision to choose adoption.

Is a letter, picture or gift being left for the child? ◯ Yes ◯ No

Please give details

Have the birth parents been given background information about the adoptive family? ◯ Yes ◯ No

Please give details

Have the birth parents prepared a contact preference? ◯ Yes No
If yes, attach the contact preference. ◯

Have the birth parents been given background information about the adoptive family? ◯ Yes ◯ No

Please give details

Additional comments of person preparing history.

Prepared by	Date yyyy-mm-dd	Signature

Reviewed by	Date yyyy-mm-dd	Signature