

HELPING PEOPLE HELP THEMSELVES

**Legal-Eaze™**

International Adoption Specialists LLC

www.Legal-Eaze.com

**READoption APPLICATION – MARYLAND**

**MOTHER**

Full Name: \_\_\_\_\_  
*First Name Middle Name Last Name (Maiden) Social Security No.*

Mother's Age at Birth of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_

Legal Residence Since: *(year)* \_\_\_\_\_ : *(street address)* \_\_\_\_\_

\_\_\_\_\_  
*City State Zip County Home Phone*

Mailing address if different from Legal Address *(Post Office Box etc.)*  
\_\_\_\_\_

Family E-mail Address: \_\_\_\_\_

Marital Status:  Unmarried  Married and living with spouse  Married/living separate and apart

Prior Marriages, if any: \_\_\_\_\_  
*Name of Ex-Spouse Date of Marriage Date of Divorce*

U.S. Citizen:  Yes  No \_\_\_\_\_  
*Country of Citizenship*

Occupation: \_\_\_\_\_ \$ \_\_\_\_\_  
*Title Name of Employer Annual Salary*

**FATHER**

Full Name: \_\_\_\_\_  
*First Name Middle Name Last Name Social Security No.*

Father's Age at Birth of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_

Legal Residence Since: *(year)* \_\_\_\_\_ : *(street address)* \_\_\_\_\_

\_\_\_\_\_  
*City State Zip County Home Phone*

Marital Status:  Unmarried  Married and living with spouse  Married/living separate and apart

Prior Marriages, if any: \_\_\_\_\_  
*Name of Ex-Spouse Date of Marriage Date of Divorce*

U.S. Citizen:  Yes  No \_\_\_\_\_  
*Country of Citizenship*

Occupation: \_\_\_\_\_ \$ \_\_\_\_\_  
*Title Name of Employer Annual Salary*

**CHILD**

Original Foreign Name: \_\_\_\_\_  
*First Middle Last Social Security Number*

Interim Foreign Name: \_\_\_\_\_  
*(For Guatemala only) First Middle Last*

New American Name: \_\_\_\_\_  
*First Middle Last*

Date of Birth: \_\_\_\_\_ Date Child Received: \_\_\_\_\_ Date of Adoption: \_\_\_\_\_

Place of Birth: \_\_\_\_\_  
*City (Province) Country*

Name of Orphanage, Foster Care or Baby House: \_\_\_\_\_

Address of Orphanage, Foster Care or Baby House (if available): \_\_\_\_\_

Name and Address of Adoption Agency: \_\_\_\_\_

Name and Address of Home Study Agency: \_\_\_\_\_

*(if you used two different agencies for the Post Home Study and Home Study update, please note them on the lines above)*

**IMPORTANT: You must enclose a certified copy of your child's birth and adoption decree with this application. (Plus PGN or Protocol for Guatemala)**

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

Do you have any knowledge that the child or an adoptive parent is the subject of an indicated report or is another person named in an indicated report of child abuse or maltreatment or has been the subject of or the respondent in a child protective proceeding which resulted in an order finding that the child is an abused or neglected child?

Yes  No If yes, explain: \_\_\_\_\_

Do you have any knowledge of any criminal record concerning yourself or any other adult residing in the household?

Yes  No If yes, explain: \_\_\_\_\_

**IMPORTANT:** You must enclose a *copy* of the following:

- Foreign Birth Certificate
- Adoption Certificate
- Certificate of Abandonment (if applicable)
- Alien Registration Card ("Green Card") (if applicable)
- Certificate of Citizenship (if available)
- USCIS Form i-171-H
- Foreign Passport (*photo page and visa page showing IR3 or IR4 visa*)

**Attached**

- Yes  No
- Yes  No
- Yes  No
- Yes  No
- Yes  No
- Yes  No
- Yes  No

The Circuit Court charges a filing fee payable by you at the time of filing. When I return your completed documents I will verify the fee and let you know what it is.

I (We) acknowledge and represent that neither *Legal-Eaze* International Adoption Specialists LLC, Patti Urban, nor any of its partners, contractors, or employees has provided me (us) with any legal service or advice. **A fee of \$500, payable to "Patti Urban and/or Legal-Eaze", must accompany this application form.** Please mail to: Legal-Eaze, 4209 Bluff Harbor Way, Wellington, FL 33449, Attn: Debra Dragunat.

\_\_\_\_\_  
*Mother's Signature Date*

\_\_\_\_\_  
*Father's Signature Date*