

Adoption Orientation Form for Adoptive Parents

*This form is based on Child Placing Adoption Rule R501-7 located are accessed here:
<https://rules.utah.gov/publicat/code/r501/r501-07.htm> or on the Office of Licensing and Background Checks
website:*

<https://dlbc.utah.gov>

Rule and statute citations are listed where applicable on each line of this form for your information

This form shall be reviewed and signed by prospective adoptive parents upon initial application and prior to payment of any fees in excess of \$500.00.

This form does not constitute legal advice and is not required for public child welfare agency adoptions.

❖ In addition to general client rights outlined in 501-1-12, as an adoptive parent in Utah you have the right to:

1. Make decisions free from fraud, duress or undue influence. 501-7-4-1(d) and 62A-2-106
2. Determine the extent which your identifying information is shared with the birth parents through a release of information. 501-7-2-9(k)
3. Expect agency transparency regarding what other personal information is shared with the birth parents 501-7-11-2(h) and 501-7-2-9
4. Be provided the Adoption Orientation Form for Pre-existing Parents and have any questions answered regarding the rights and responsibilities of pre-existing parents. 501-7-9-c(i)
5. Seek medical, emotional, legal and social work advice from independent resources prior to becoming matched or accepting placement. 501-7-4-1.d(v)
6. Be notified of what services will be provided by your Child Placing Adoption Agency, including but not limited to: pre-adoption counseling, training, home study, birth parent services, matching and placement services, post placement support groups and visit(s). 501-7-6-1&6 and 501-7-9-2(b)
7. Ask to participate in an open or closed adoption and ask to meet birthparents prior to placement with the understanding that any agreements regarding post placement contact are not enforceable under Utah Law. 501-7-11-2.r(i)&(2)
8. Meet in-person (including video/telephonic contact) privately for an agency representative to read aloud and explain this orientation form prior to match or payment of any fees exceeding \$500.00 501-7-9-2(a)
9. Be informed by the agency prior to being matched and ongoing through the adoption process regarding the legal status of any known potential father and any efforts regarding the notification process. 501-7-9-2(c) and 501-7-11-3(d)
10. Retain legal counsel 501-7-4-1.d(v)
11. Be provided sufficient information prior to accepting a match 501-7-8-1(c) and 501-7-8-4(c)

12. Be informed of what a “match” means to the agency you are working with. 501-7-4-2(k) and 501-7-8-3
13. Receive a fee disclosure statement prior to entering into any agreements that outlines all agency fees and the agency’s policy of charging either fixed (estimated) or actual adoption related expenses. If providing an estimated range of fees, the agency shall additionally provide average costs for the past 2 years of each itemized fee or expense and the refund policy 501-7-6-6
14. Obtain a copy of any home study or pre-placement evaluation you have purchased from the agency, recognizing that such a copy is for personal use and not necessarily valid to provide to other agencies or the court for future use. 501-7-6-1(j) and (k)
15. Receive in writing non-identifying information (if known) concerning the child and his or her birth family. 501-7-9-10(e) and 501-7-2-10
16. File and work to resolve any grievance directly with the agency. If there is a question or complaint regarding a Licensing rule violation you may contact the office via email: licensingconcerns@utah.gov or by calling 801-538-4242. 501-1-9-2(b)
17. Understand that your child will have an original birth certificate retained at the Office of Vital Records with their birth name on it as given at the time of delivery.
18. Request identifying information from birth parents. 501-7-9-4(a)
19. Be informed that your child has special needs if they are between the ages of 5-18 with known evidence of a physical, emotional or developmental disability or is the member of a sibling group placed for adoption. The agency is required to provide additional training to you in regard to special needs children. 501-7-8.d(i)&(ii) and e
20. Be informed that your child might qualify as a “high needs” child if they have an attachment or trauma-related disorder, suffered from prenatal exposure to alcohol or drugs, are subject of an intercountry adoption or was previously in foster care. 62A-4a-609
21. Receive training on all adoption related issues including additional training regarding special or high needs children if applicable. 501-7-8-1-E(v) and 501-7-8-2(b)
22. Be informed of legal risks of a placement as known to the agency at the time of placement or as they arise 501-7-9-10(c)
23. Be informed that Utah has a voluntary Mutual Consent Registry that can connect adoptees and birth parents after the adoptee is 18 years old if both parties have registered. 501-7-11-2(x) and 501-7-11-3(p)

I/We have read all 23 items above and had all questions answered by an agency representative to my/our satisfaction. **Initials:** _____ **Initials:** _____

❖ **As an Adoptive Parent you have the responsibility to:**

1. Obtain the necessary approved home study and documentation in order to adopt under Utah Law. 78B-6-128
2. Not coerce or pressure a pre-existing parent to make a plan of adoption. 76-7-203
3. Pay all contracted service fees and adoption related expenses in a timely manner.
4. Cooperate in obtaining the necessary training on adoption related issues 62A-4a-609
5. Cooperate with post-placement monitoring and support 78B-6-129
6. Keep your agency informed of new relevant information about your family.
7. Follow-through on good faith commitments made regarding post-placement contact
8. Provide for the care, maintenance and support of any child placed in your home 78B-6-134
9. Be forthcoming and honest with accurate and thorough information.

I/we understand my/our responsibilities and agree to abide by them.

Initials: _____ **Initials:** _____

❖ **Signatures**

Verify that you have read this 3-page form in its entirety. Only sign once you have had the opportunity to ask clarifying questions and had all questions answered to your satisfaction.

Adoptive Parent Printed Name

Adoptive Parent Signature

Date

Adoptive Parent Printed Name

Adoptive Parent Signature

Date

Agency Representative Printed Name and Credentials

Agency Representative Signature

Date