Recommended Model Forms for use under the 1993 Adoption Convention
Foreword

It is with great pleasure that I introduce this publication on the *Recommended Model Forms* (Model Forms) which have been developed for use under the *Convention of 29 May 1993 on Protection of Children and Co-operation in Respect of Intercountry Adoption* (1993 Adoption Convention). Indeed, the importance of developing Model Forms to simplify and facilitate compliance with the 1993 Adoption Convention has been acknowledged since the beginning of negotiations and at all the meetings of the Special Commission on the practical operation of the 1993 Adoption Convention (see Introduction).

These Model Forms contain important information regarding safeguards established by the 1993 Adoption Convention, such as the consent of persons, institutions, and authorities in the process of adoption (Art. 4(c) and (d)), the adoptability of the child (Art. 16) and the eligibility and suitability of prospective adoptive parents (Art. 15). Thus, the Model Forms are a tool to gather information to ensure that all involved parties can make informed decisions that are in line with the best interests of the child. For example, the *Statement of consent of the child to intercountry adoption* form, which has been drafted in a particularly child-friendly style, aligns seamlessly with recognising the right of the child to be heard, having regard to their age and degree of maturity, and have the child be involved in decisions affecting their life — a matter of heightened relevance in today’s intercountry adoption landscape, where adopted children are increasingly of an older age.

The publication of these Recommended Model Forms for use under the 1993 Adoption Convention will serve as another piece in the puzzle towards furthering the protection of children, in complementarity to another recent HCCH publication, the *Toolkit for Preventing and Addressing Illicit Practices in Intercountry Adoption*.

I would also like to acknowledge the efforts made by many of the 1993 Adoption Convention Contracting Parties to develop their own model forms. While the Model Forms contained in this publication are in no way binding upon States or authorities, and Contracting Parties may wish to adapt these Models Forms to their own particular needs, I am confident that these Model Forms will be a useful and complementary resource for Contracting Parties and States interested in joining the Convention. They will also facilitate a proper and uniform application of the Convention.

Finally, I wish to take this opportunity to thank the Central Authorities under the 1993 Adoption Convention for their valuable comments and suggestions that greatly contributed to improving the Model Forms. Their diligent and interdisciplinary efforts over the years have been essential for the development and refinement of the Model Forms presented in this publication. I would also like to acknowledge all the colleagues at the Permanent Bureau who over the years have contributed to this work.

Dr Christophe Bernasconi | Secretary General

February 2024
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Introduction
This publication compiles all the Recommended Model Forms for use under the Convention of 29 May 1993 on Protection of Children and Cooperation in Respect of Intercountry Adoption (1993 Adoption Convention) following the approval by the Council on General Affairs and Policy (CGAP) of the HCCH in March 2023 and the recommendation by the Special Commission on the Practical Operation of the 1993 Adoption Convention in 2022 (SC).1

1. It includes the following Recommended Model Forms:2

**Birth Family:**
- Recommended Model Form No 1: Statement of consent of the legal parents or the legal representative of the child to the adoption (Art. 4(c))

**Child:**
- Recommended Model Form No 2: Report on the child (Art. 16)
- Recommended Model Form No 3: Medical report on the child (Art. 16)
- Recommended Model Form No 4: Report concerning the psychological and social circumstances of the small child (Art. 16)
- Recommended Model Form No 5: Statement of consent of the child to the intercountry adoption (Art. 4(d))
- Recommended Model Form No 6: Post-adoption report on the child

**Prospective Adoptive Parents:**
- Recommended Model Form No 7: Report on the prospective adoptive parents

**Article 17 Agreement:**
- Recommended Model Form No 8A (SO): Agreement that the adoption may proceed (Art. 17(c))
- Recommended Model Form No 8B (RS): Agreement that the adoption may proceed (Art. 17(c))

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1 Conclusions & Decisions (C&D) of CGAP (2023), para. 24 and Conclusions & Recommendations (C&R) of the SC on the Practical Operation of the 1993 Adoption Convention (2022), C&R No 20.


2 Recommended Model Forms Nos 1, 3, 4 and 9 were already approved in the past and are included in HCCH, Guide to Good Practice No 1: The Implementation and Operation of the 1993 Hague Intercountry Adoption Convention, Bristol, Family Law (Jordan Publishing Limited), 2008 (Guide to Good Practice No 1), Annex 7. In this new publication the format and the terminology of these Forms have been updated to ensure consistency and coherence across all Model Forms.
Article 23 Certificate:

- Recommended Model Form No 9: Certificate of conformity of intercountry adoption with the 1993 Adoption Convention (Art. 23)
- Recommended Model Form No 10: Certificate of conformity following the conversion of a simple adoption to a full adoption (Arts 23 & 27)

2. The aim of the Recommended Model Forms is to create more consistency among the content of the reports and forms and for ease of reference for Contracting Parties. In particular, Model Forms may provide an example or guidance for new Contracting Parties, as well as for Contracting Parties that wish to revise or improve their current forms. The SC recognised in 2022 that Model Forms assist in standardising processes. ³

3. However, the fact that the 1993 Adoption Convention has been in force since 1995, that it has over 100 Contracting Parties, that many of them have already developed their own forms to assist them in the implementation of the Convention and that some Contracting Parties have reported that it may be too challenging to agree on a uniform format, needs to be taken into consideration. Therefore, it must be emphasised that the Model Forms are simply recommended and not compulsory and that Contracting Parties may continue using their own forms, in particular where they are more detailed and allow for a more complete assessment of the situation.

4. The SC recognised in 2022 that “although the Model Forms are only recommended and not compulsory, the SC strongly encouraged all Contracting Parties to make use of them when consistent with the procedures and legislations of the State”. ⁴

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³ C&R of the SC on the Practical Operation of the 1993 Adoption Convention (2022), C&R No 20.
⁴ Ibid.
Birth Family
Recommended Model Form No 1

Statement of consent of the legal parents or the legal representative of the child to the adoption (Art. 4(c))
ARTICLE 4(c) OF THE 1993 ADOPTION CONVENTION

Article 4(c)

An adoption within the scope of the Convention shall take place only if the competent authorities of the State of origin - [...] - have ensured that

1. the persons, institutions and authorities whose consent is necessary for adoption, have been counselled as may be necessary and duly informed of the effects of their consent, in particular whether or not an adoption will result in the termination of the legal relationship between the child and his or her family of origin,

2. such persons, institutions and authorities have given their consent freely, in the required legal form, and expressed or evidenced in writing,

3. the consents have not been induced by payment or compensation of any kind and have not been withdrawn, and

4. the consent of the mother, where required, has been given only after the birth of the child; [...] .

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?

This Form includes the different aspects of consent as per Article 4(c) of the 1993 Adoption Convention.

It is designed to document the consent to the adoption of a child by their legal parents or the legal representative when it is required by domestic law.

2. When should this Model Form be used?

This Form should be used to record the consent to the adoption of a child by their legal parents or the legal representative.

Before proceeding, the official attesting the consent should determine whether free and informed consent can be obtained.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).
3. **Is the use of this Model Form compulsory?**
   
   No, it is only a Recommended Model Form, which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Statement of consent of the legal parents or the legal representative of the child to the adoption

Read the following statements carefully before completing them. Sign below only when you fully understand each statement. You have the right to receive any counselling or information which you may want to have about the effects of your consent. You have the right, if you so desire, to receive a copy of this document.

You should not have received any payment or compensation of any kind made or offered for the purpose of obtaining your consent to the adoption of the child.

I, the undersigned: ________________
Family name: ________________
Given name(s): ________________
Date of birth: ________________
Habitual residence: ________________

☐ Mother ☐ Father ☐ Legal representative of the child

Family name: ________________
Given name(s): ________________
Gender: ________________
Date of birth: ________________
Place of birth: ________________
Habitual residence: ________________

declare as follows:

☐ I freely consent, without threat or coercion, to the adoption of this child.
☐ I understand that my child may be adopted by spouses or a person residing abroad.
☐ I understand that the adoption of this child will create a permanent parent-child relationship with the adoptive parent(s).
☐ I give my consent for the purpose of an adoption that terminates the pre-existing legal parent-child relationship between the child and his or her mother and father.
☐ I have been informed that I may withdraw my consent until ________________ and that after that date my consent will be irrevocable.
☐ I declare that I have fully understood the above statements.
Done at ____________ on ______________.

City, State     Date

Signature or Mark:

DECLARATION OF WITNESS(ES) (where required by law or by the circumstances, e.g., in the case of illiterate person or person with a disability)

_______________

CERTIFICATION OF THE AUTHORITY AUTHORISED TO ATTEST THE CONSENT

Name: ____________

Title: ____________

I hereby certify that the person (and the witness(es)) named or identified above appeared before me this date and signed this document in my presence.

Done at ____________ on ______________.

City, State     Date

Signature / Seal:
Child
Recommended Model Form No 2

Report on the child (Art. 16)
ARTICLE 16 OF THE 1993 ADOPTION CONVENTION

Article 16
(1) If the Central Authority of the State of origin is satisfied that the child is adoptable, it shall (a) prepare a report including information about his or her identity, adoptability, background, social environment, family history, medical history including that of the child’s family, and any special needs of the child; […]

(2) It shall transmit to the Central Authority of the receiving State its report on the child, proof that the necessary consents have been obtained and the reasons for its determination on the placement, taking care not to reveal the identity of the mother and the father if, in the State of origin, these identities may not be disclosed.

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?
This Form follows the content mentioned in Article 16(1) of the Convention. Namely: information about the child’s identity, adoptability, background, social environment, family history, medical history including that of the child’s family, and any special needs of the child.

2. When should this report be drafted?
This report should be prepared once the Central Authority of the State of origin is satisfied that the child is adoptable.
Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

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1 This Model Form may be adapted in light of domestic laws. For example, depending on States’ domestic laws, some of the information appearing in this form may not be shared with prospective adoptive parents; and personal data such as names of care-givers, documents such as birth certificates, passport copies, should not be revealed until after matching has taken place.

This Model Form complements any report on the child drafted previously or at the time of their placement in alternative care.
It may be complemented by Recommended Model Form No 3: Medical report on the child (Art. 16) and Recommended Model Form No 4: Report concerning the psychological and social circumstances of the small child (Art. 16).
3. What about the protection of personal data?

Article 16(2) provides that authorities should take care “not to reveal the identity of the mother and father if, in the State of origin, these identities may not be disclosed”.

Thus, each State will need to adapt the report according to the State’s own requirements and restrictions relating to the law on data protection.

4. Is the use of this is Model Form compulsory?

No, it is only a Recommended Model Form, which may need to be adapted by each State.
## RECOMMENDED MODEL FORM

### Report on the child (Art. 16)

<table>
<thead>
<tr>
<th>Date of the report</th>
<th>____________________</th>
</tr>
</thead>
</table>
| Authority / body¹ issuing the report | Name: ________________  
Address: ________________ |
| Author(s) of the report | Name: ________________  
Function: ________________  
Contact details: ________________ |
| Sources of information upon which this report is based: e.g., interviews, counselling sessions, reports of professionals. For each: |  
- list the date(s) on which they took place | ____________________  
| - identify the person(s) present | ____________________  
| - attach any professional reports where possible (see Section J below) | ____________________  
| Please also identify any other person(s) interviewed for the purposes of this report | ____________________ |

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¹ The responses to the questions may require the authority / body drafting this report to cooperate with different authorities and bodies in their State.
A. **IDENTITY OF THE CHILD**

1. Full name at birth: _______________
2. Any other names used for the child: _______________
3. Date of birth: _______________
4. Place of birth (city and State): _______________
5. Gender: _______________
6. Language(s): _______________
7. Current address: _______________
8. Chronology of child’s prior residences from birth until being placed in alternative care:

<table>
<thead>
<tr>
<th>From (date)</th>
<th>To (date)</th>
<th>Name and location of the residence</th>
<th>Name of the primary caregiver</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

9. Chronology of child’s placement history since their placement in alternative care (beginning with the child’s *current* place of residence):

<table>
<thead>
<tr>
<th>From (date)</th>
<th>To (date)</th>
<th>Name and location of the alternative care placement (e.g., extended family, foster care, institution)</th>
<th>Name of the primary caregiver during this placement and relationship of this person to the child</th>
<th>Authority / body / person authorising the placement</th>
</tr>
</thead>
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</tbody>
</table>

\[1\] If any of this information is not available because the child was found, please write “unknown” and provide as much detail as possible in Section B below.
10. Details of the birth family if available and not confidential:

**Note:** Article 16(2) of the 1993 Adoption Convention recalls that care must be taken not to reveal the identity of the child’s birth mother or father in the information sent to the receiving State if, in the State of origin, these identities may not be disclosed.

Please therefore complete (a) to (d) below providing as much information about each family member as domestic law permits. If identifying information cannot be provided, please provide non-identifying information to the extent that it is possible and permitted under domestic law.

a. Parents:

<table>
<thead>
<tr>
<th></th>
<th>Full Name</th>
<th>Date of birth / age</th>
<th>Place of residence</th>
<th>Nationality</th>
<th>Marital status (at the time of the child’s birth; now)</th>
<th>Occupation</th>
<th>Any other information which can be provided</th>
<th>If deceased, cause and date of death</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>________</td>
<td>________</td>
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<td>Father</td>
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<tr>
<td>Any other legal parent</td>
<td>________</td>
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</tbody>
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<tr>
<th></th>
<th>Legal parenage established (Yes / No)</th>
<th>Legal custody of the child (Yes / No)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>________</td>
<td>________</td>
</tr>
<tr>
<td>Father</td>
<td>________</td>
<td>________</td>
</tr>
<tr>
<td>Any other legal parent</td>
<td>________</td>
<td>________</td>
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</tbody>
</table>

3 E.g., physical characteristics, personality traits, interests, birthplace.
b. Siblings:

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date of birth / age</th>
<th>Gender</th>
<th>Place of residence</th>
<th>Nationality</th>
<th>In need of an adoption and adoptable (Yes / No)</th>
<th>Any other information which can be provided(^4)</th>
<th>If deceased, cause and date of death</th>
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- Please give further details if one or more sibling(s) has / have been adopted domestically or internationally previously or is / are currently being considered for adoption (together with the child or not): ______________

c. Grandparent(s)

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date of birth / age</th>
<th>Gender</th>
<th>Place of residence</th>
<th>Nationality</th>
<th>Occupation</th>
<th>Any other information which can be provided</th>
<th>If deceased, cause and date of death</th>
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</table>

\(^4\) This may include, for example, whether they are full, half or step siblings, whether they lived together.
d. Other family member(s):
   - Relationship with the child: ______________
   - Other information which can be provided (e.g., full name, date of birth or age, place of residence, nationality, occupation; if deceased, cause and date of death): ______________

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B. THE CHILD’S LEGAL STATUS

1. Does the child have a birth document:
   □ Yes – please specify which document (e.g., birth certificate, birth registration, family register): ______________
   □ No\(^5\) – please explain why not: ______________

   Please specify:
   - the additional steps which must be undertaken for a birth certificate to be issued: ______________
   - who / which authority or body is responsible for this procedure: ______________

   Please attach a copy of the child’s birth document.

2. The child’s nationality\(^6\) ______________
   a. Does the child possess the nationality of the State in which they are currently living:
      □ Yes
      □ No – please explain why not: ______________

      Please specify:
      - the additional steps which must be undertaken for the child to acquire this nationality: ______________
      - who / which authority or body is responsible for this procedure: ______________
      - whether this has any impact on the child's ability to be adopted: ______________

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\(^5\) Please note that children who are in the process of being adopted should be provided with a birth certificate and the adoption should not proceed until the child has been provided with such a birth certificate.

\(^6\) Nationality refers to the legal status of an individual belonging to a sovereign State with the legal rights and protection of the sovereign State’s government. In some States this legal status is referred to as ‘citizenship’. References to ‘nationality’ should therefore be understood as including ‘citizenship’.
b. Does the child possess another nationality:

☐ Yes – please identify: ________________

☐ No

Please attach a copy of the child's passport(s) or other proof of nationality.

3. Parental and legal rights and responsibilities concerning the child

a. Please specify who / which authority has parental rights and responsibilities for the child and / or is the current legal guardian: ________________

Name and address: ________________

Please specify the relationship of this person / authority to the child: ________________

Please specify the date of acquisition of the parental and legal rights and responsibilities: ________________

Where applicable, please specify which authority appointed the legal guardian: ________________

b. Please specify who / which authority has the (full time) care of the child (e.g., custody of the child): ________________

Name and address: ________________

Please specify the relationship of this person / authority to the child: ________________

Please include a copy of any Guardianship Order(s) relating to the child (if there are issues of confidentiality, a redacted copy may be provided), as well as any Placement Order(s) relating to the child, if disclosure of such Order(s) is permitted.

4. The circumstances which led to the child being declared adoptable:

a. Was the child entrusted for adoption by their birth family (i.e., birth parents or members of the extended family) or legal guardian(s)?

☐ No, please go to question 4(b)

☐ Yes

If yes, please complete the following information (if possible (i.e., not confidential)):

- Name(s) and address(es) of the person(s) who entrusted the child: ________________

- Circumstances surrounding the entrustment of the child: ________________

Please note that in most cases, it will only be possible to tick "yes" in either a, b, c or d (i.e., it would be particularly rare that the circumstances which led to the child being declared adoptable would require "yes" being ticked more than once).
- Activities that have been undertaken to try to prevent the entrustment of the child (in the free text field which follows each answer, please provide as much detail as possible):
  - Home visits (please indicate the purpose of the home visit(s), e.g., for educational support, for parenting support): ______________
  - Counselling sessions: ______________
  - Social and psychological support: ______________
  - Economic support: ______________
  - Other. Please specify: ______________

If the person who entrusted the child was under 18 years old\(^8\) at the time, please specify any particular measure taken to assist this person: ______________

b. Was the child found?
  - No. please go to question 4(c)
  - Yes

If yes, please provide the following information:
  - Details concerning the place where the child was found (e.g., city, address, nature of location): ______________
  - The date on which the child was found: ______________
  - The approximate age of the child when found: ______________
  - The name(s) and address(es) of the person(s) who found the child and / or reported the child abandoned: ______________
  - The circumstances surrounding the finding of the child: ______________
  - Any evidence of abandonment (e.g., an abandonment certificate or note by birth parent(s)/guardian(s), if available, as well as a copy of the decision of an authority declaring the child abandoned or judgment of abandonment, if disclosure is permitted): ______________
  - The activities that have been undertaken in order to try to find the child’s birth family (in the free text field which follows each answer, please provide as much detail as possible):
    - Interviews with neighbours, local people etc: ______________
    - Investigation by police or other relevant agencies ______________
    - Social media announcements ______________
    - Television announcements ______________
    - Radio announcements ______________

\(^8\) Or under the age of majority if majority is attained after 18 years old.
Please note that the legal parents may not always be the birth parents.
5. Adoptability of the child

a. The following consents (as applicable) to the child’s intercountry adoption have been obtained in accordance with Article 4 of the 1993 Adoption Convention:

   Note: Article 16(2) of the 1993 Adoption Convention requires that the Central Authority of the State of origin transmits to the Central Authority of the receiving State proof that the necessary consent(s) have been obtained.

i. Consent(s) of the legal (birth) parents:
   - Yes. Please provide any details possible and attach a copy to this report:
   - No. Please specify why (e.g., efforts to obtain the consent and any known reasons why it could not be obtained):
   - Not applicable. Please specify why:

ii. Consent(s) of any legal guardian(s) of the child:
   - Yes. Please provide any details possible and attach a copy to this report:
   - No. Please specify why (e.g., efforts to obtain the consent and any known reasons why it could not be obtained):
   - Not applicable. Please specify why:

iii. Consent(s) of any relevant public authority / body or other person (e.g., Mayor, Chief of village):
   - Yes. Please provide any details possible and attach a copy to this report:
   - No. Please specify why:
   - Not applicable. Please specify why:

10 See further Guide to Good Practice No 1, Chapter 7.2.1
11 Ibid. Chapter 2.2.3 and Recommended Model Form No 1: Statement of consent of the legal parents or the legal representative of the child to the adoption.
12 If applicable, as required by the domestic legislation.
13 If applicable, as required by the domestic legislation.
iv. Consent of the child to being adopted in general (not to the specific adoption):\textsuperscript{14}

- Yes. Please provide any details possible and attach a copy to this report: 
- No. Please specify why: 
- Not applicable. Please specify why (e.g., consent not required by law because of the child’s age): 

v. Other:

- Yes. Please specify by whom, provide any details possible and attach a copy to this report: 
- No. Any comments: 

b. The child’s psycho-social adoptability\textsuperscript{15}

- Name and address of the authority responsible for ensuring that the child is psycho-socially adoptable: 
- Function (e.g., psychologist, social worker, counsellor) of the person responsible for assessing the child’s psycho-social adoptability: 
- Please briefly explain the process that has been undertaken to ensure that the child is psycho-socially adoptable: 

c. Decision concerning the child’s adoptability

- Date of the decision by the competent authority concerning the adoptability of the child: 
- Name and address of the competent authority:
  - Administrative authority: 
  - Judicial authority: 

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\textsuperscript{14} Consent should, ideally, be obtained at two stages of the adoption:
- First, general consent prior to the child being considered for adoption. It is important that they consent to being adopted generally (i.e., in order for the child to be mentally prepared to the idea of a possible adoption, but also in order to prevent situations where a child is declared adoptable while that child refuses to be adopted).
- Second, consent to a specific adoption, after the child has been matched with prospective adoptive parents. Indeed, a general consent does not fulfill the requirement under Art. 4(d)(i) of the Convention, as this requirement for consent must be given in light of the particular prospective adoption. For further information, see G. Parra-Aranguen, Explanatory Report on the 1993 Adoption Convention (“Explanatory Report”), para. 161: “[T]he consent of the child, having regard to his or her age and maturity, shall be given not to the adoption in general, but for the specific adoption in a particular case, since it would be against his or her fundamental rights to have the child adopted without even knowing who the adoptive parents are going to be.”

Taking this into consideration, the consent referred to in this section refers to the first consent and not to the consent required under Art. 4 of the 1993 Adoption Convention.

\textsuperscript{15} The child’s psycho-social adoptability is usually determined by the assessment that the child will benefit from a family environment (and will be able to adapt to such an environment), that the child understands what an adoption entails and that the child considers that it would be in their best interests to be adopted. See further Guide to Good Practice No. 1, Chapter 7.2.1.
Please attach a copy of the declaration of adoptability of the child to this report.

C. THE PRINCIPLE OF SUBSIDIARITY (Art. 4(b) of the 1993 Adoption Convention)

1. What efforts have been made to reintegrate the child into their family and why did these efforts not succeed: ______________

2. What efforts have been made to place the child in their extended family in the State of origin and why did these efforts not succeed: ______________

3. What efforts have been made to place the child in other families in the child’s State of origin (e.g., through domestic adoption or foster care) (subsidiarity): ______________

4. Reasons for the relevant competent authority determining, after giving due consideration to the possibilities for placement of the child within the State of origin, that intercountry adoption is in the child’s best interests (please include an explanation as to what efforts were made to place the child domestically and why domestic adoption was not considered a suitable option for the child - subsidiarity): ______________

D. THE CHILD’S FAMILY HISTORY

1. Please provide general information on the ethnic, social, religious, cultural and family background of the child (e.g., values and traditions of the family, any cultural practices): ______________

2. Have there been any reports of neglect or abuse in the family: ______________

3. What efforts have been made to place siblings together (if applicable and if appropriate in the particular case) and if siblings were not placed together, please explain why: ______________

4. Since the child has been in an alternative care placement (if applicable), what visits have the birth family or community members made to the child and what type of relationship has been maintained: ______________

5. Please include any report on the birth parents; a genogram or family tree with last known geographic locations of the child’s family members; as well as any items (or copy of such items) left by the birth parents or extended family to the child (e.g., a letter, clothes, documents), if disclosure of such items is permitted.

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16 If any of this information is not available because the child was found, please write “unknown” and provide as much detail as possible.
E. THE CHILD’S MEDICAL HISTORY, HEALTH AND DEVELOPMENT

Please provide a separate Medical Report on the child (e.g., complete Recommended Model Form No 3: "Medical report on the child" and its supplement17 or any other medical report (e.g., lab reports, x-rays, MRIs), using, if possible, the ICD norm18) that is not older than six months at the time of this report. Please also include a full body photo of the child and a report on the child’s developmental milestones.

In addition to the separate Medical Report on the child:

- please provide a brief medical history of immediate family members, including the current health of the child’s birth parents and possible genetic and / or hereditary conditions that may impact the child:19 _______________
- please provide a brief prenatal history: ______________

F. THE CHILD’S SPECIAL NEEDS

You may wish to cross-refer to the Medical Report on the Child in the section above.

1. Does the child have any special needs:20
   - Yes – please provide a detailed description and explanation, including how these needs have been identified:
     - Medical - physical: _______________
     - Medical, psychiatric or psychological: _______________
     - Behavioural / social: _______________
     - Educational (e.g., learning disabilities): _______________
     - Other (please specify): _______________

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17 See Recommended Model Form No 3: Medical report on the child (Art. 16) and Recommended Model Form No 4: Report concerning the psychological and social circumstances of the small child (Art. 16).
18 International Statistical Classification of Diseases and Related Health Problems (ICD). This classification is available at www.who.int/classifications/classification-of-diseases.
19 If any of this information is not available because the child was found, please write "unknown" and provide as much detail as possible.
20 “Children with special needs are those who may be: suffering from a behaviour disorder or trauma, physically or mentally disabled, older children (usually above 7 years of age), or part of a sibling group” (see Guide to Good Practice No 1, Section 7.3.1).
No. Any comments: ______________

2. Name and address of the authority responsible for identifying the child’s special needs:
_______________

3. What is the current treatment plan to address the child’s special needs and what progress has been made thus far:
_______________

4. Has the child received any special support regarding their special needs:
_______________

5. Is any additional support required which has not yet been provided:
_______________

G. THE CHILD’S CURRENT ENVIRONMENT

1. Type of placement:
- Please describe the child’s current placement:
_______________
- Please specify if the child is currently placed with any siblings, or if the child has any contact with siblings or birth family members and if so, what type of contact and how often:
_______________
- Please provide details about the child’s adjustment to their current place of residence:
_______________
- Describe the child’s relationship with the persons in their life (e.g., birth family, including birth parents, siblings, extended family, foster family, social workers, care providers):
_______________
- Are any birth family members and / or significant persons in the child’s life willing to maintain any type of openness / contact post-adoption, or willing to have their information shared so the child and adoptive parents may maintain a relationship / contact with them. If so, please provided further details:
_______________

2. Type of schooling (if applicable):
- Date(s) of schooling:
_______________
- Overall performance, milestones achieved (including any significant grades achieved):
_______________
- Strengths and weaknesses:
_______________

3. Activities (e.g., physical activities / sport, cultural activities, social activities, games / toys):
_______________

4. Favourite and least preferred activities:
_______________

Please provide information that is not older than six months at the time of this report.
5. Relationship with care providers / teachers: ______________
6. Relationships with peers and friends: ______________
7. Names of the children and adults with whom the child has developed strong relationships: ______________
8. Any behavioural or social development issues: ______________
9. Please include any professional reports concerning the child (e.g., psychological reports, school or educational reports, reports on the child’s life), as well as photographs and / or videos of the child in their current environment.

H. PREPARATION AND VIEWS OF THE CHILD CONCERNING THE POSSIBILITY OF BEING ADOPTED INTERCOUNTRY

1. Name and function of the person(s) in charge of the child’s preparation for intercountry adoption: ______________
2. Please explain the process which is being / has been undertaken to prepare the child for an intercountry adoption: ______________
3. Has the child received counselling:
   - Yes – please provide details, including the type of professional providing the counselling, the number of sessions / frequency, and the length of the counselling: ______________
   - No – please explain why not: ______________
4. The child’s views and / or perception regarding the possibility to be adopted intercountry:
   - How did the child react to the possibility to be adopted intercountry: ______________
   - What is the child’s understanding of the consequences of an intercountry adoption: ______________
   - How did the child react to the possibility of being separated from their siblings (if applicable), other significant family members or persons: ______________

I. ADDITIONAL COMMENTS / RECOMMENDATIONS

1. Describe the type of family that could meet the needs of the child: ______________
2. Any other comments / recommendations: ______________
J. CHECKLIST OF DOCUMENTS TO ATTACH TO THIS REPORT (as applicable)

Where possible, please attach the following documents to this report:

☐ The child’s birth document (e.g., birth certificate, birth registry, family register)
☐ A copy of the child’s passport(s) or other proof of nationality
☐ Any evidence of abandonment (e.g., an abandonment certificate or note by birth parent(s)/guardian(s), if available)
☐ Proof of any required consent(s) by persons (e.g., the birth parents), institutions and/or authorities, to the child’s adoption
☐ Death certificates of legal (birth) parents (if applicable)
☐ Proof of termination of previously held parental rights and responsibilities (if applicable) (e.g., court order, decision)
☐ The declaration of adoptability of the child
☐ A recent (i.e., not older than 6 months) Medical Report on the child (i.e., the completed “Medical report on the child”\textsuperscript{22} and its supplement, or any other medical report (e.g., lab reports, x-rays, MRIs), using, if possible, the ICD norm\textsuperscript{23}), and a report on the child’s developmental milestones.
☐ Medical information regarding the child’s mother, father and siblings (or other significant family members, as applicable)
☐ Any other professional reports concerning the child (e.g., psychological reports, school or educational reports, reports on the child’s life)
☐ Any report on the birth parents
☐ Genogram or family tree with last known geographic locations of the child’s family members
☐ Photographs (including a full body photo of the child) and/or videos of the child in their current environment

If disclosure of the following documents is permitted by domestic law (i.e., if the following documents are not confidential), please also attach:

☐ Any decision of an authority removing the rights / responsibilities of the birth parents and/or legal guardian(s)
☐ Any decision of an authority declaring the child abandoned / judgment of abandonment

\textsuperscript{22} See Recommended Model Form No 3: Medical report on the child (Art. 16) and Recommended Model Form No 4: Report concerning the psychological and social circumstances of the small child (Art. 16).

\textsuperscript{23} International Statistical Classification of Diseases and Related Health Problems (ICD). This classification is available at www.who.int/classifications/classification-of-diseases.
☐ Any Guardianship Order(s) relating to the child (if there are issues of confidentiality, a redacted copy may be provided)

☐ Any Placement Order(s) relating to the child

☐ Any items (or copy of such items) left by the birth parents or extended family to the child (e.g., a letter, clothes, documents).

If (a) document(s) exist(s) but could not be attached to this report, please explain why: ________________

K. CERTIFICATION OF THE AUTHORITY / PERSON AUTHORISED TO COMPLETE THE REPORT

Name: ________________

Title: ________________

Authority: ________________

I hereby certify that the present report is true, correct and complete.

Done at ________________ on ____________

City, State Date

Signature / Seal: ________________
Recommended Model Form No 3

Medical report on the child (Art. 16)
ARTICLE 16 OF THE 1993 ADOPTION CONVENTION

Article 16

(1) If the Central Authority of the State of origin is satisfied that the child is adoptable, it shall (a) prepare a report including information about his or her identity, adoptability, background, social environment, family history, medical history including that of the child’s family, and any special needs of the child; [...] (2) It shall transmit to the Central Authority of the receiving State its report on the child, proof that the necessary consents have been obtained and the reasons for its determination on the placement, taking care not to reveal the identity of the mother and the father if, in the State of origin, these identities may not be disclosed.

EXPLANATORY SECTION¹

1. What has been included in this Recommended Model Form?

This Form follows one of the aspects of the report on the child content mentioned in Article 16(1) of the 1993 Adoption Convention. Namely: medical history including that of the child’s family, and any special needs of the child.

2. When should this report be drafted?

This report should be prepared once the Central Authority of the State of origin is satisfied that the child is adoptable.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

3. What about the protection of personal data?

Article 16(2) provides that authorities should take care “not to reveal the identity of the mother and father if, in the State of origin, these identities may not be disclosed”.

¹ This Model Form may be adapted in light of domestic laws. For example, depending on States’ domestic laws, some of the information appearing in this form may not be shared with prospective adoptive parents; and personal data should not be revealed until after matching has taken place.

This Model Form complements any report on the child drafted previously or at the time of their placement in alternative care, as well as Recommended Model Form No 2: Report on the child (Art. 16).
Thus, each State will need to adapt the report according to the State’s own requirements and restrictions relating to the law on data protection.

4. **Is the use of this Model Form compulsory?**

   No, it is only a Recommended Model Form, which may need to be adapted by each State.
RECOMMENDED MODEL FORM  
Medical report on the child (Art. 16)

A duly licensed physician should complete this report.
Please decide on each heading.
If the information in question is not available, please state "unknown".

<table>
<thead>
<tr>
<th>Name of the child:</th>
<th>________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date and year of birth:</td>
<td>________________</td>
</tr>
<tr>
<td>Gender:</td>
<td>________________</td>
</tr>
<tr>
<td>Place of birth:</td>
<td>________________</td>
</tr>
<tr>
<td>Nationality:</td>
<td>________________</td>
</tr>
<tr>
<td>Name of the mother:</td>
<td>________________</td>
</tr>
<tr>
<td>Date and year of her birth:</td>
<td>________________</td>
</tr>
<tr>
<td>Name of the father:</td>
<td>________________</td>
</tr>
<tr>
<td>Date and year of his birth:</td>
<td>________________</td>
</tr>
<tr>
<td>Name of the present institution:</td>
<td>________________</td>
</tr>
<tr>
<td>Placed since:</td>
<td>________________</td>
</tr>
<tr>
<td>Weight:</td>
<td></td>
</tr>
<tr>
<td>At birth:</td>
<td>________________ kg</td>
</tr>
<tr>
<td>At admission:</td>
<td>________________ kg</td>
</tr>
<tr>
<td>Length:</td>
<td></td>
</tr>
<tr>
<td>At birth:</td>
<td>________________ cm</td>
</tr>
<tr>
<td>At admission:</td>
<td>________________ cm</td>
</tr>
<tr>
<td>Was the pregnancy and delivery normal?</td>
<td>□ Yes □ No □ Do not know</td>
</tr>
</tbody>
</table>
### Where has the child been staying?

<table>
<thead>
<tr>
<th>Option</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>with their mother:</td>
<td>from ___________ (date) to ___________ (date).</td>
</tr>
<tr>
<td>with relatives:</td>
<td>from ___________ (date) to ___________ (date).</td>
</tr>
<tr>
<td>in private care:</td>
<td>from ___________ (date) to ___________ (date).</td>
</tr>
<tr>
<td>in institution or hospital:</td>
<td>from ___________ (date) to ___________ (date).</td>
</tr>
</tbody>
</table>

**Please state the name of the institution or institutions concerned:**

---

### Has the child had any diseases during the past time?

<table>
<thead>
<tr>
<th>Disease</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ordinary children’s diseases (whooping cough, measles, chicken-pox, rubella, mumps)</td>
<td>___________</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>___________</td>
</tr>
<tr>
<td>Convulsions (incl. Febrile convulsions)</td>
<td>___________</td>
</tr>
<tr>
<td>Any other disease</td>
<td>___________</td>
</tr>
<tr>
<td>Exposition to contagious disease</td>
<td>___________</td>
</tr>
</tbody>
</table>

**Please indicate the age of the child in respect to each disease, as well as any complication:**

---

### Has the child been vaccinated against any of the following diseases?

<table>
<thead>
<tr>
<th>Disease</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis (B.C.G.)</td>
<td>___________</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>___________</td>
</tr>
<tr>
<td>Tetanus</td>
<td>___________</td>
</tr>
<tr>
<td>Whooping cough</td>
<td>___________</td>
</tr>
<tr>
<td>Poliomyelitis</td>
<td>___________</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>___________</td>
</tr>
</tbody>
</table>
### Hepatitis B
- Date of injection: ______________

### Other immunisations
- Please specify which one and the date(s) of injection: ______________

### Has the child been treated in hospital?
- Yes. Please state the name of the hospital, age of child, diagnosis, and treatment: ______________
- No
- Do not know

### If possible, give a description of the mental development, behaviour and skills of the child:

#### Visual:
- When was the child able to fix? ______________
- Do not know

#### Aural:
- When was the child able to turn their head in reaction to sounds? ______________
- Do not know

#### Motor:
- When was the child able to sit by themselves? ______________
- Do not know
- Stand by support? ______________
- Do not know
- Walk without support? ______________
- Do not know

#### Language:
- When did the child start to prattle? ______________
- Do not know
- Say single words? ______________
- Do not know
- Say sentences? ______________
- Do not know

#### Contact:
- When did the child start to smile? ______________
- Do not know
- How do they react towards strangers? ______________
- Do not know
<table>
<thead>
<tr>
<th>Emotional:</th>
<th>How do they communicate with adults and other children?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emotional:</th>
<th>How does the child show emotions (anger, uneasiness, disappointment, joy)?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Do not know</td>
</tr>
</tbody>
</table>

### Medical examination of the child

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of the medical examination:</td>
<td>____________________________</td>
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<table>
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<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Weight:</td>
<td>____________________________</td>
</tr>
<tr>
<td>date:</td>
<td>____________________________</td>
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<th>____________________________</th>
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<tbody>
<tr>
<td>Height:</td>
<td>____________________________</td>
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<tr>
<td>date:</td>
<td>____________________________</td>
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<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Head circumference:</td>
<td>____________________________</td>
</tr>
<tr>
<td>date:</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Colour of hair:</td>
<td>____________________________</td>
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</tbody>
</table>

<table>
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<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Colour of eyes:</td>
<td>____________________________</td>
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<table>
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<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Colour of skin:</td>
<td>____________________________</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Date of the examination:</td>
<td>____________________________</td>
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<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Head (form of skull, hydrocephalus, craniotabes):</td>
<td>____________________________</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Mouth and pharynx (harelip or cleft palate, teeth):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes (vision, strabismus, infections):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ears (infections, discharge, reduced hearing, deformity):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organs of the chest (heart, lungs):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
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</thead>
<tbody>
<tr>
<td>Lymphatic glands (adenitis):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdomen (hernia, liver, spleen):</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Genitals (hypospadia, testis, retention):</td>
<td>____________________________</td>
</tr>
<tr>
<td><strong>Spinal column (kyphosis, scoliosis):</strong></td>
<td>______________</td>
</tr>
<tr>
<td>Extremities (pes equinus, valgus, varus, pes calcaneovarus, flexation of the hip, spasticity, paresis):</td>
<td>______________</td>
</tr>
<tr>
<td>Skin (eczema, infections, parasites):</td>
<td>______________</td>
</tr>
<tr>
<td>Other diseases:</td>
<td>______________</td>
</tr>
</tbody>
</table>

**Are there any symptoms of syphilis in the child?**
- [ ] Positive
- [ ] Negative
- [ ] Not done

**Result of syphilis reaction made (date and year):** ______________

**Any symptoms of tuberculosis?**
- [ ] Positive
- [ ] Negative
- [ ] Not done

**Result of tuberculin test made (date and year):** ______________

**Any symptoms of Hepatitis A?**
- [ ] Positive
- [ ] Negative
- [ ] Not done

**Result of tests for hepatitis A made (date and year):** ______________

**Any symptoms of Hepatitis B?**
- [ ] Positive
- [ ] Negative
- [ ] Not done

**Result of tests for HBsAg (date and year):** ______________

**Result of tests for anti-HBs (date and year):** ______________

**Result of tests for HBeAg (date and year):** ______________
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No/Not done</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Result of tests for anti-HBe (date and year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any symptoms of AIDS?</td>
<td>Positive/Negative/Not done</td>
<td></td>
</tr>
<tr>
<td>Result of tests for HIV made (date and year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Symptoms of any other infectious disease?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the urine contain?</td>
<td>Sugar/Albumen/Phenylketone</td>
<td></td>
</tr>
<tr>
<td>Stools (diarrhoea, constipation):</td>
<td>Examination for parasites Positive/Species Negative/Not done</td>
<td></td>
</tr>
<tr>
<td>Is there any mental disease or retardation of the child?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Give a description of the mental development, behaviour and skills of the child. <em>This is of particular value for advising the prospective parents.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any additional comments:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature and stamp of the examining physician:

Date: _______________
Recommended Model Form No 4

Report concerning the psychological and social circumstances of the small child (Art. 16)
(Supplement to the general medical report on the child)
ARTICLE 16 OF THE 1993 ADOPTION CONVENTION

Article 16

(1) If the Central Authority of the State of origin is satisfied that the child is adoptable, it shall (a) prepare a report including information about his or her identity, adoptability, background, social environment, family history, medical history including that of the child’s family, and any special needs of the child; [...] (2) It shall transmit to the Central Authority of the receiving State its report on the child, proof that the necessary consents have been obtained and the reasons for its determination on the placement, taking care not to reveal the identity of the mother and the father if, in the State of origin, these identities may not be disclosed.

EXPLANATORY SECTION¹

1. What has been included in this Recommended Model Form?

This Form follows one of the aspects of the report on the child content mentioned in Article 16(1) of the 1993 Adoption Convention. Namely: medical history including that of the child’s family, and any special needs of the child.

2. When should this report be drafted?

This report should be prepared once the Central Authority of the State of origin is satisfied that the child is adoptable.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

¹ This Model Form may be adapted in light of domestic laws. For example, depending on States’ domestic laws, some of the information appearing in this form may not be shared with prospective adoptive parents; and personal data should not be revealed until after matching has taken place.

This Model Form complements any report on the child drafted previously or at the time of their placement in alternative care, as well as the Recommended Model Form No 2: Report on the child.
3. **What about the protection of personal data?**

   Article 16(2) provides that authorities should take care “not to reveal the identity of the mother and father if, in the State of origin, these identities may not be disclosed”.

   Thus, each State will need to adapt the report according to the State’s own requirements and restrictions relating to the law on data protection.

4. **Is the use of this Model Form compulsory?**

   No, it is only a Recommended Model Form, which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Report concerning the psychological and social circumstances of the small child (Art. 16)
(Supplement to the general medical report on the child)

Please respond to each of the following statements:

**Activity with toys:**
- The child’s eyes follow rattles / toys, that are moved in front of the child
- The child holds on to a rattle
- The child plays with rattles: putting it in the mouth, shaking it, moving it from one hand to the other, etc
- The child puts cubes on top of each other
- The child plays purposely with toys: pushes cars, puts dolls to bed, feeds dolls, etc
- The child plays role-play with toys with other children
- The child draws faces, human beings or animals with distinct features
- The child cooperates in structured games with other children (ballgames, card games, etc)
- No observation available

**Vocalization / language development:**
- The child vocalizes in contact with caregiver
- The child repeats different vowel-consonant combinations (ba-ba, da-da, ma-ma etc)
- The child uses single words to communicate needs
- The child speaks in sentences
- The child understands prepositions as: on top of, under, behind, etc
- The child uses prepositions as: on top of, under, behind, etc
- The child speaks in past tense
- The child writes his own name
- The child reads simple words
- No observation available

**Motor development:**
- The child turns from back to stomach from age
- The child sits without support from age
- The child crawls/moves forwards from age
The child walks with support from furniture from age ______________
The child walks alone from age ______________
The child walks up and down stairs with support from age ______________
The child walks up and down stairs without support from age ______________
The child rides a bicycle without support from age ______________

**Contact with adults:**
- The child smiles in contact with known caregiver ______________
- The child is more easily soothed when held by known caregiver ______________
- The child cries/follows known caregiver, when the caregiver leaves the room ______________
- The child actively seeks known caregiver when they are upset or have hurt themselves ______________
- The child seeks physical contact with all adults, that come into the ward ______________
- The child communicates his feeling in words to caregivers ______________

**Contact with other children:**
- The child shows interest in other children by looking or smiling at their activity ______________
- The child enjoys playing beside other children ______________
- The child engages actively in activities with other children ______________

**General level of activity:**
- Passive ______________
- Active ______________
- Overactive ______________

**General mood:**
- Sober, serious ______________
- Emotionally indifferent ______________
- Fussy, difficult to soothe ______________
- Happy, content ______________

Any additional comments? ______________

Name, occupation, signature and stamp of the examining person: ______________

Date: ______________
Recommended Model Form No 5

Statement of consent of the child to the intercountry adoption (Art. 4(d))
Recommended Model Form No 5
Statement of consent of the child to the intercountry adoption (Art. 4(d))

ARTICLE 4 (d) OF THE 1993 ADOPTION CONVENTION

Article 4(d)

An adoption within the scope of the Convention shall take place only if the competent authorities of the State of origin - [...] -

(d) have ensured, having regard to the age and degree of maturity of the child, that

(1) he or she has been counselled and duly informed of the effects of the adoption and of his or her consent to the adoption, where such consent is required, [...] -

(3) the child’s consent to the adoption, where such consent is required, has been given freely, in the required legal form, and expressed or evidenced in writing, and

(4) such consent has not been induced by payment or compensation of any kind.

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?

This Form includes the different aspects of consent as per Article 4(d) of the Convention.

It is designed to document the child’s consent when it is required by domestic law. Thus, States may determine a minimum age for consent and the required legal form of consent.

To the extent possible, this Form has been drafted in a child-friendly manner.
States are encouraged to develop guidelines\(^1\) on how to take consent from a child, having regard to their degree of maturity, to ensure that the child is able to consent, to prevent pressure being put on the child to consent, as well as to establish a new life plan in case the child does not want to give their consent.

2. **When should this Model Form be used?**

   This Form should be used to record the child’s consent to a specific\(^2\) adoption once the child has been matched.

   Before proceeding, the official attesting the consent should determine, in light of the child’s capacity, age and degree of maturity, whether free and informed consent can be obtained.

   States may also find it useful to use this Model Form to help inform the child on the legal consequences of consent if the child is sufficiently mature, even if the consent is not yet legally required.

   Assistance and communication with the child should be provided in a child-friendly manner, taking into account that some children may be overwhelmed if they have to respond to too many questions.

   Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

3. **Is the use of this Model Form compulsory?**

   No, it is only a Recommended Model Form, which may need to be adapted by each State.

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\(^1\) States may, in addition to this form, develop detailed guidance in a separate manual or as an annex to the Model Form on how to take the child’s statement of consent; the manual or annex may also contain the instructions to the official taking the statement of consent and the witness attesting to the informed consent.

Such a separate manual or annex should also include guidance on how to prepare the child to intercountry adoption, how to ensure that the child understands what an intercountry adoption is and what it entails, including when, for example, the child’s consent is not (yet) required by law or when the child is not mature enough to give their consent. Such guidance could also include case scenarios to touch upon different situations.

\(^2\) Consent should, ideally, be obtained at two stages of the adoption:

- **First**, general consent prior to the child being considered for adoption. It is important that they consent to being adopted generally (i.e., in order for the child to be mentally prepared to the idea of a possible adoption, but also in order to prevent situations where a child is declared adoptable while that child refuses to be adopted).

- **Second**, consent to a specific adoption, after the child has been matched with prospective adoptive parents. Indeed, a general consent does not fulfill the requirement under Art. 4(d)(ii) of the Convention, as this requirement for consent must be given in light of the particular prospective adoption. For further information, see G. Parra-Aranguren, Explanatory Report on the 1993 Adoption Convention (“Explanatory Report”), para. 161: “[T]he consent of the child, having regard to his or her age and maturity, shall be given not to the adoption in general, but for the specific adoption in a particular case, since it would be against his or her fundamental rights to have the child adopted without even knowing who the adoptive parents are going to be”.

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A. STATEMENT OF CONSENT OF THE CHILD TO THE INTERCOUNTRY ADOPTION

Instructions for the child:
- **Step 1**: An adult (*e.g.*, a social worker, a lawyer, a professional working in the government) should help you work through and understand what an adoption is, what an adoption means to you and what is this document.
- **Step 2**: Part A will be read aloud to you in a language that you understand. The person reading or taking your statement should make sure that you fully understand everything in this form, answering any questions you may have.
- **Step 3**: Please fill in any empty spaces in the “About me” section (section 1 below) or, if someone else filled it in for you, read it and make sure you agree with what they have written.
- **Step 4**: Read each sentence carefully in sections 2 to 7 below. You will then be asked to explain in your own words what Part A means. If you agree with what has been written, then tick the last box in section 7 to show that you have read and understood it.
  
  If there are two possible options in the text (*e.g.*, “is / was”; “birth parents / legal guardian(s)”), you can cross out the part that does not apply to your situation.
- **Step 5**: Sign this document only if you understand and agree with each sentence.
  
  You do not have to sign this document, and no-one should force, threaten, or in any way pressure you into signing it (*i.e.*, no one should make you feel that you have to sign it if you do not want to). If you feel this is the case, you may wish to contact [*add authority / phone number / email*] and / or a person you trust.
- **Step 6**: You should receive a copy of the completed version of the document.

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1. **Note to official(s) attesting the consent**: if the child is illiterate, the instructions for the child under Part A should be read aloud clearly once again, one by one to the child. If the child understands it and is in agreement with it, the child can place their “mark” (*e.g.*, thumbprint) at the end of the Statement instead of their signature.
1. ABOUT ME

My name is _______________ (full legal name of child).

I am: □ male   □ female   □ other (e.g., preferred gender): _______________

I was born on ___________ (day) of ___________ (month) ___________ (year) in ___________ (place of birth).

My current address is: _______________

My mother is / was: _______________

My father is / was: _______________

2. MY PROPOSED ADOPTION AND MY PROSPECTIVE ADOPTIVE PARENTS

☐ I understand that a plan has been made that I be adopted because (e.g., loss of parents, consent of birth parents, unknown birth parents, termination of parental rights through a court order): _______________

☐ I know that _______________ (full name of prospective adoptive parent(s)) would like to adopt me.

☐ I agree to being adopted by this (these) person(s).

☐ I understand that being adopted means that my adoptive parent(s) will become my new legal parent(s) and I will be considered to be their child (under law).

☐ I understand that I may need to go in front of a competent authority (e.g., a judge in a court) to be adopted.

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Note to official(s) attesting the consent: this section may be completed by the child or by the official, as appropriate in light of the child’s age and degree of maturity. The information provided in this section should be identical to the information in the child’s current identity document.
3. MY LEGAL RELATIONSHIP WITH MY BIRTH PARENTS\(^3\)

- **Section A: For a “Full Adoption”:**
  - I understand that my proposed adoption is a “full” adoption. I understand that this means that:
    - my birth parents / legal guardian(s) __________________ (full name of birth parents / legal guardian(s)) will no longer be my legal parents and I will no longer be legally their child / will no longer be my legal guardian(s); and
    - my adoptive parents will become my legal parents and I will become their legal child. I understand that they will have parental responsibility (i.e., they will be able to make important decisions about me and my life).

- **Section B: For a “Simple Adoption”:**
  - I understand that my proposed adoption is a “simple” adoption. I understand that this means that:
    - my birth parents / legal guardian(s) __________________ (full name of birth parents / legal guardian(s)) will still be my legal parents / legal guardian(s);
    - my adoptive parents ________________ (full name of adoptive parents) will also be my legal parents;
    - I will live with my adoptive parents, and they will have parental responsibility (i.e., make important decisions about me and my life).
  - I understand that it is possible that (in the future) my simple adoption could become a full adoption. This means that my birth parents would no longer be my legal parents and that I would no longer be legally their child, and that only my adoptive parents would be my legal parents. If this happens, I will be asked whether I agree to this type of adoption.

4. AFTER THE ADOPTION

- I understand that after the adoption I will live with ________________ (full name of prospective adoptive parent(s)) in their home in ________________ (city, State).

My given name(s) after the adoption:

- I agree that my given name(s) after the adoption will be ________________.

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3 Note to official(s) attesting the consent: Select the appropriate Section, A or B, below, and complete that Section only. If only one full adoption is allowed in your State, then the Model Form can be adapted and only include Section A.

**Section A:** If the consent of a child is sought for a FULL adoption (i.e., an adoption which severs the legal ties between the child and their birth parents or current legal guardian(s)), whether this full adoption is to be made in the State of origin or in the receiving State, use the “Full Adoption” Section only.

**Section B:** If the consent of the child is sought for a SIMPLE adoption only (i.e., an adoption which does NOT sever the legal ties between the child and their birth parents or current legal guardian(s)), use the “Simple Adoption” Section only.

For further information see: Arts 26 and 27 of the 1993 Adoption Convention and Guide to Good Practice No 1, Chapter 8.8.8.
☐ I want to keep my current given name(s) after the adoption.

☐ I know the following about the State I will live in after the adoption: ____________ (description of what the child knows of their receiving State)

5. THE INFORMATION I HAVE RECEIVED

The name(s) of the person(s) I have spoken with regarding my adoption is / are: ____________

I have received this information on: ____________ (date(s)).

I have been asked what would be important for me if I was adopted. This is what I responded: ____________

The person(s) I have spoken about this adoption with is / are (check all that apply):

☐ a psychologist (professional person who wonders how I feel)
☐ a social worker / counsellor (professional person who takes care of my needs)
☐ an independent lawyer (person who knows about law)
☐ a government official (person who works in the government)
☐ other – please specify: ____________

This / these person(s) (check all that apply): 

☐ explained what an adoption is and what it will mean for me;
☐ explained what it means for me to sign this document;
☐ told me that I may change my mind (i.e., withdrawal of consent) about the adoption until the adoption decision is issued and that after that date I will not be able to change my mind anymore; and
☐ answered all of my questions.

6. MY CONSENT

☐ I have not received or been promised any money, gift(s) or anything else (apart from the normal benefits of an adoption, such as a home, friends, material support, etc.) in return for agreeing to this adoption.

☐ No one has told me or made me feel that I must agree to this adoption. I have not been threatened, forced or in any way pressured into agreeing to this adoption.

☐ This form was read aloud to me, and I have been asked to explain in my own words what Part A of this form means.
7. COPY OF THIS DOCUMENT

☐ I have received a copy of this document after I completed it.
☐ I declare that I have fully understood the above statements and I consent to this adoption.

Done at ____________ on ____________
City, State Date

Signature or mark of the child: ____________

B. DECLARATION OF WITNESS(ES): (where required by domestic law)

To be completed if the witness is also in charge of counselling the child about the adoption and duly informing the child of the effects of the adoption and their consent (Art. 4(d)(1) 1993 Adoption Convention)

I ____________ (full name) of ____________ (full address) hereby declare and certify that:

1. I am:
   ☐ a licensed psychologist / social worker / counsellor (please specify) ____________
   ☐ a member of the bar of ____________ (city, State)
   ☐ a government official (please specify your title) ____________
   ☐ other (please specify) ____________

4 States may specify in advance in their law or regulations who can act as a witness in such circumstances.
2. ☐ I am not acting for any other person in this adoption case and I have no known connection with any other party in this case.

3. ☐ I have seen the following document(s) ______________ (name documents) and I am satisfied as to the identity of the child providing their consent to this adoption.

4. I have explained to ______________ (child’s full name):
   ☐ the nature and effect of adoption under the law of the State of origin and the law of the receiving State;
   ☐ the nature and effect of their consent to the adoption;
   ☐ the circumstances under which the consent may be withdrawn before it becomes irrevocable; and
   ☐ the date upon which their consent will become irrevocable.
   ☐ I am satisfied that the child understands this information.

5. I am satisfied that the child:
   ☐ has received appropriate and sufficient counselling and information about this adoption; and
   ☐ has had ample opportunity to read (or to be read) and ask questions about the “Statement of Consent” (Part A above) and any accompanying information.

6. ☐ I am not aware of any mental, emotional or physical unfitness of the child to give consent.

7. ☐ I have asked the child whether they had received or had been promised any money, gift(s) or anything else in return for agreeing to this adoption (apart from the normal benefits of an adoption, such as a home, friends, material support, etc.) and the child said no.

8. ☐ I have asked the child whether there had been any attempt to threaten, force or in any way pressure them into providing their consent to this adoption and the child said no.

9. On __________ (date) at __________ (city, State), I witnessed that __________ (child’s full name):
   ☐ read [or was read to the child], the “Statement of Consent” (Part A above);
   ☐ received an explanation on the “Statement of Consent” (Part A above) and understood it, and
   ☐ signed [or placed their mark], and thereby gave their consent to this adoption.

Done at __________ on __________

City, State
Date

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5 If the child is illiterate - amend as appropriate.
6 If the child is illiterate - amend as appropriate.
Signature of witness: ____________

For any other witness(es)

I ____________ of ______________ (full address) hereby declare and certify that:

☐ I have no known connection with any party in this case;

☐ I have seen the following document(s) ______________ (name documents) and I am satisfied as to the identity of the child providing their consent to this adoption.

1. With regard to ______________ (child’s full name) I am not aware of:
   ☐ any mental, emotional or physical unfitness of the child to give consent;
   ☐ any promise of money, gift(s) or anything else in return for the child’s consent to this adoption (apart from the normal benefits of an adoption, such as a home, friends, material support, etc.);
   ☐ any attempt to threaten, force or in any way pressure the child into providing their consent to this adoption.

2. On ______________ (date) at ______________ (city, State), I witnessed that ______________ (child’s full name):
   ☐ read [or was read to the child], the “Statement of Consent” (Part A above);
   ☐ received an explanation on the “Statement of Consent” (Part A above) and understood it, and
   ☐ signed [or placed their mark], and thereby gave their consent to this adoption.

Done at ______________ on ______________

City, State Date

Signature of witness(es): ____________

7 If the child is illiterate – amend as appropriate.
8 If the child is illiterate – amend as appropriate.
C. CERTIFICATION OF THE AUTHORITY / PERSON AUTHORISED TO ATTEST THE CONSENT

Name: _______________
Title: _______________
Authority: _______________

1. I hereby certify that _______________ (child’s full name) appeared before me on this date and that I read aloud the “Statement of Consent” (Part A above) to the child. I have witnessed any questions of the child being answered, and the child has explained in their own words what Part A of this form means. The child then read\(^9\) and signed\(^{10}\) the “Statement of Consent” in my presence.

2. I hereby certify that the witness(es) named above appeared before me on this date, witnessed my reading aloud to the child of the “Statement of Consent”, witnessed any questions of the child being answered, witnessed the child fully explaining in their own words what Part A of this form means, witnessed the child reading themselves the “Statement of Consent",\(^{11}\) witnessed the signature\(^{12}\) of the child, and signed the “Declaration of Witness(es)” document (Part B above) in my presence. (If not applicable, please delete.)

3. I hereby certify that I am not the same person who assisted the child to provide consent for their adoption.

Done at _______________ on _______________
City, State Date

Signature / Seal: _______________

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\(^9\) If the child has the capacity to read.
\(^{10}\) Or placed their mark (if the child is illiterate).
\(^{11}\) If the child has the capacity to read.
\(^{12}\) Or placed their mark (if the child is illiterate).
Recommended Model Form No 6

Post-adoption report on the child
Recommended Model Form No 6
Post-adoption report on the child

ARTICLE 9 OF THE 1993 ADOPTION CONVENTION

Article 9(d) and (e)

Central Authorities shall take, directly or through public authorities or other bodies duly accredited in their State, all appropriate measures, in particular to

- provide each other with general evaluation reports about experience with intercountry adoption;
- reply, in so far as is permitted by the law of their State, to justified requests from other Central Authorities or public authorities for information about a particular adoption situation.

EXPLANATORY SECTION

1. Does the Convention require post-adoption reports?

The Convention only provides for “general evaluation reports about experience with intercountry adoption“ and “[replies] […] to justified requests […] for information about a particular adoption situation”, but does not provide for individualised regular post-adoption reports.

In other words, “the matter of supplying post-adoption reports on individual children at regular intervals and for a fixed period is not regulated by the Convention” (Guide to Good Practice No 1 (GGP 1), para. 592). See further, Chapter 9.3 of GGP 1.

2. If individual post-adoption reports are not required under the Convention, then why is there a Model Form?

“A recommendation was made on post-adoption reporting to reflect the compromise that was needed in this matter. It states as follows: ‘The Special Commission

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1 Some receiving States are of the view that a very detailed report may be seen by a significant number of adopted children and adoptive families as inappropriate and intrusive. Thus, the duration and frequency of any post-adoption reporting obligations and the extent of the information provided in post-adoption reporting in general should be balanced with and adjusted to the child’s age and the child’s right to privacy (see GGP 1, para. 600); the high expectations vis-à-vis the prospective adoptive parents (and the high standards imposed in terms of their suitability to adopt) and their right to care and raise their child without continued scrutiny from officials of the receiving State or the State of origin.

As well as monitoring the adoption, information in this report may be used to improve post-adoption support services.
recommends to receiving States to encourage compliance with post-adoption reporting requirements of States of origin: a model form might be developed for this purpose. Similarly, the Special Commission recommends to States of origin to limit the period in which they require post-adoption reporting in recognition of the mutual confidence which provides the framework for co-operation under the Convention” (GGP 1, para. 601).

3. **What about the right to privacy and the protection of personal data?**

Each State will need to adapt the report according to the right to privacy of families and to their domestic law on data protection. States of origin also need to recognise that the Central Authorities, public authorities or other bodies from the receiving States may not always be able to assist with the completion of this form because of the right to privacy of families and the protection of personal data.

4. **When should this report be drafted?**

This Recommended Model Form may be used for any post-adoption reports required by the State of origin, according to relevant applicable law or practice, after an adoption decision has been made. Two different reports are included in this Model Form, first an *Initial Report* which is more detailed, and then a model for *Follow-up Reports* which is more general.²

It is recommended inviting, or at least consulting, the child to participate in completing this Form, having regard to the age and maturity of the child, and wishes to have input or not.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

5. **Is the use of this Model Form compulsory?**

No, it is only a Recommended Model Form, which may need to be adapted by each State.

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² This Recommended Model Form presents contents for both a detailed form that can serve as inspiration for the *first post-adoption report* (or when the child is young), and a *follow-up report* with more general questions that attempts to take into consideration the right of adoptees to be treated like other children (i.e., not have additional requirements that do not apply to children who are not adopted) and their right to privacy vis-à-vis officials of the receiving State and the State of origin. States may also wish to use (and / or adapt) this form during the adoption procedure, to report on the socialisation period between the child and the prospective adoptive parents.
RECOMMENDED MODEL FORM
Post-adoption report on the child

INITIAL POST-ADOPTION REPORT:

1. Date of the report: ________________

2. Author of the report:
   - Name: ________________
   - Function: ________________
   - Authority / body (if applicable): ________________

3. Interviews:
   - Persons interviewed: ________________
   - Place(s) (e.g., home visits, meetings outside the home): ________________
   - Date(s) of the meeting(s): ________________

A. INFORMATION ABOUT THE CHILD, THE ADOPTIVE FAMILY AND THE ADOPTION

1. Full name of the child before the adoption: ________________
2. Full name of the child after the adoption: ________________
3. Date of birth of the child: ________________
4. Current age of the child: ________________
5. Place of birth (city and State) of the child: ________________
6. Competent authority which issued the adoption decision: ________________
7. Date of the adoption decision: ________________
8. Date of arrival of the child in the receiving State: ________________

1 An initial report refers to the first report provided to the State of origin following the intercountry adoption and it may therefore be more relevant to provide more comprehensive information. For further information see GGP 1, Chapter 9.3. Please also note that this Model Form may also be used as a model for post-placement report (Art. 20 of the 1993 Adoption Convention).
9. Nationality of the child:
   a. Has the child acquired the nationality of one or both of the adoptive parents:
      □ Yes. Please specify the nationality acquired: ________________
      □ No. Please explain why not: ________________
   b. Has the child acquired another nationality:
      □ Yes. Please specify which nationality: ________________
      □ No.
10. Full name(s) of adoptive parent(s): ________________
11. Name(s) and age(s) of the other children of the family (if applicable): ________________
12. Other members of the family with whom the child has a connection (if applicable), please mention their relationship with the child (e.g., grandparent, aunt, uncle, cousins): ________________
13. Adoption accredited body involved in the child’s adoption (if applicable): ________________

B. THE CHILD’S HEALTH AND SPECIAL NEEDS

1. Please provide information about the current health condition of the child, any health issues that the child had and how they are / have been addressed: ________________
2. Please describe the physical development and motor skills of the child: ________________
3. What was the child’s height and weight at the time of the child came into the care of the adoptive parents (if known) and what is their current height and weight? ________________
4. Is the child up to date on their immunisations (vaccinations)? ________________
5. Does the child have any special needs?
   □ Yes. Please specify: ________________
      What progress has been made? ________________
      What has the effect of these special needs been on the adoptive family? ________________
      Do the child and the family receive support (e.g., medical support, therapeutic support, financial support, material support) to address the child’s special needs? If so, please explain: ________________
   □ No.

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2 To the extent possible, and in particular for the initial report, information about the child’s health and their special needs should be completed by qualified professionals.
6. Was the child’s health status at the time of the adoption decision consistent with the status as described in the “Report on the Child” transmitted by the State of origin pursuant to Article 16 of the 1993 Adoption Convention?

☐ Yes.

☐ No. Please indicate which health issues have been detected since the adoption which were not described in the report: _____________

C. THE CHILD AND THE ADOPTIVE FAMILY

1. Please provide information about the current attachment and bonding of the child with each family member (each parent, and if applicable, siblings and other family members). Please assess each relationship separately: _____________

2. What issues and challenges, if any, have been encountered by:
   a. the child – in adjusting to the new family environment: _____________
   b. the adoptive family – in caring for the child (e.g., adjustment to new parenting responsibilities, influence and effects of adoption on the parents’ relationship and the other children of the adoptive parents): _____________

3. How are / were the challenges addressed? Please explain any support received, including external resources (e.g., social workers, therapists, psychologists)? _____________

4. Has the child been accepted by, and has the child integrated into, the extended adoptive family? Please explain how: _____________

5. Has the child been integrated into the broader social environment of the adoptive family (e.g., friends of the adoptive family, other adoptive families and support groups)? _____________

6. How are the adoptive parents integrating the child’s culture into their day to day lives? _____________

7. What are the living conditions in the home (e.g., does the child have their own room, is there space for play and study)? _____________

8. What is the family dynamic in the home (e.g., are both adoptive parents active in parenting, what are their respective roles, what is the time distribution of caring for the child do they have support (e.g., family members who help, babysitters))? _____________

9. Have there been any significant changes in the family since the child was adopted (e.g., changes in marital status, residence, employment, persons living in the home, illness, grief)? _____________

10. How do the adoptive parents look back on the adoption of their child? _____________
D. SOCIAL, EMOTIONAL, MENTAL AND OTHER DEVELOPMENTS

1. Please provide information about the current social and emotional development of the child, including:
   a. relationship with friends outside school: ______________
   b. relationship with the community (e.g., neighbours, adoptive associations): ______________
   c. positive developments: ______________
   d. any challenges that the child had or is having (e.g., cognitive delays or behavioural or social issues): ______________
   e. how these challenges are / have been addressed: ______________

2. What is the personality, temperament, attachment to others and general behaviour of the child at the current time? How does the child express their emotions: anger, frustrations, happiness, love? ______________

3. Who is the child close to and like to spend time with? In situations of difficulties, who does the child turn to? ______________

4. How has the child’s ability to self-care developed, i.e., is the child able to dress, feed and keep clean? ______________

5. Please provide information about the child’s cognitive development, intelligence, problem solving ability, creativity, ability to learn, ability to occupy themselves alone, ability to deal with moments of boredom, autonomy: ______________

6. Please specify any other challenges that the child had or is having, and how they are / have been addressed: ______________

E. EDUCATION / CHILDCARE

1. Is the child in day care or schooling? Please specify: ______________

2. Please describe how the child finds day care / school: ______________

3. How does the child perform at school? ______________

4. What are the child’s current linguistic skills and has the child acquired a new language? ______________

5. Does the child need any special assistance / tutoring (e.g., language classes)? ______________

6. What extracurricular activities does the child enjoy (e.g., physical activities / sport, cultural activities, social activities, games)? ______________
F. THE CHILD’S ORIGINS

1. What has been / is being done to inform the child about their origins, history, culture, the adoption procedure (e.g., talking to the child, showing photos from the child’s life before adoption, maintaining a life book) and to help the child manage all this information? __________

2. Is the child interested in maintaining a connection with their culture of origin (e.g., language, religion, food)? __________

3. Has the child maintained contact with previous caregivers or any significant persons in their life prior to the adoption? If so, how is this contact maintained? __________

4. What challenges have been encountered since the adoption concerning the child’s origins and the adoption (e.g., discrimination)? __________

5. Does the child have any contact with their birth family:

☐ Yes – please specify the type of contact (e.g., via social media, letter, telephone, video calls, in-person), the frequency of the contact and provide any other comments: __________

☐ No. Any comments: __________

G. ADDITIONAL COMMENTS / RECOMMENDATIONS

Please provide any other comments, feedback or recommendations, if applicable: __________

H. DOCUMENTS TO ATTACH TO THIS REPORT

Where possible and in agreement with the child, having regard to their age and maturity, and the prospective adoptive parents, recent photograph(s) of the child and any documents that the family may wish to share may be attached to this report.
RECOMMENDED MODEL FORM

Post-adoption report on the child

FOLLOW UP POST-ADOPTION REPORT:

1. Date of the report: _______________

2. Author of the report:
   - Name: _______________
   - Function: _______________
   - Authority / body (if applicable): _______________

3. Interviews:
   - Persons interviewed: _______________
   - Place(s) (e.g., home visits, meetings outside the home): _______________
   - Date(s) of the meeting(s): _______________

A. INFORMATION ABOUT THE CHILD, THE ADOPTIVE FAMILY AND THE ADOPTION

1. Full name of the child before the adoption: _______________
2. Full name of the child after the adoption: _______________
3. Date of birth of the child: _______________
4. Current age of the child: _______________
5. Place of birth (city and State) of the child: _______________
6. Competent authority which issued the adoption decision: _______________
7. Date of the adoption decision: _______________
8. Date of arrival of the child in the receiving State: _______________

---

1 A follow-up post adoption report refers to the subsequent reports that may be requested by the State of origin after the initial report. For further information see Guide to Good Practice No.1, Chapter 9.3.
9. Nationality of the child:
   a. Has the child acquired the nationality of one or both of the adoptive parents:
      - Yes. Please specify the nationality acquired: ______________
      - No. Please explain why not: ______________
   b. Has the child acquired another nationality:
      - Yes. Please specify which nationality: ______________
      - No.
10. Full name(s) of adoptive parent(s): ______________
11. Name(s) and age(s) of the other children of the family (if applicable): ______________
12. Other members of the family with whom the child has a connection (if applicable), please mention their relationship with the child (e.g., grandparent, aunt, uncle, cousins): ______________

B. THE CHILD'S HEALTH AND SPECIAL NEEDS

Please provide information about the child's current health, any health issues or conditions, any special needs, and how they are / have been addressed: ______________

C. THE CHILD AND THE ADOPTIVE FAMILY

Please provide information about the child and the adoptive family (e.g., current relationship of the child with family members (each parent, and if applicable, siblings)); any challenges and how they are / have been addressed: ______________

Please provide information about any significant change in the family since the child was adopted, and how the adoptive parents reflect upon their child's adoption: ______________

D. SOCIAL, EMOTIONAL, MENTAL AND OTHER DEVELOPMENTS

Please provide information about the child’s social, emotional and other developments (e.g., current social and self-awareness; any challenges that the child had or is having (including behavioural issues), and how they are / have been addressed): ______________
Please provide information about the child’s mental development (e.g., the child’s cognitive development, intelligence, problem solving, creativity, ability to learn, ability to occupy themselves alone, ability to deal with moments of boredom, autonomy; any challenges that the child had or is having and how they are / have been addressed): ______________

E. EDUCATION / CHILDCARE

Please provide information about the child’s education or childcare (e.g., child’s progress at school, information about the grade the child is attending, if the child is in the normal range for their age, if the child requires special assistance or tutoring; extracurricular activities; relationship with teachers, peers and friends; any challenges and how they are / were addressed): ______________

F. THE CHILD’S ORIGINS

Please provide information about the child’s origins (e.g., what has been / is being done regarding the child’s understanding and appreciation of their State of origin, as well as the maintenance of the child’s connection to their culture of origin; any challenges and how they are / were addressed; if the child has any contact with their birth family, and how this is going; contact with previous caregivers or any significant persons in their life prior to the adoption; if the child has shown an interest in visiting the State of origin, and /or search for their origins): ______________

G. ADDITIONAL COMMENTS / RECOMMENDATIONS

Please provide any other comments, feedback or recommendations, if applicable: ______________

H. DOCUMENTS TO ATTACH TO THIS REPORT

Where possible and in agreement with the child, having regard to their age and maturity, and the prospective adoptive parents, recent photograph(s) of the child and any documents that the family may wish to share may be attached to this report.
Prospective Adoptive Parents
Recommended Model Form No 7

Report on the prospective adoptive parents (Art. 15)
ARTICLE 15 OF THE 1993 ADOPTION CONVENTION

Article 15

(1) If the Central Authority of the receiving State is satisfied that the applicants are eligible and suited to adopt, it shall prepare a report including information about their identity, eligibility and suitability to adopt, background, family and medical history, social environment, reasons for adoption, ability to undertake an intercountry adoption, as well as the characteristics of the children for whom they would be qualified to care.

(2) It shall transmit the report to the Central Authority of the State of origin.

EXPLANATORY SECTION¹

1. What has been included in this Recommended Model Form?

This Form follows the content mentioned in Article 15 (1) of the Convention. Namely: information about their identity, eligibility and suitability to adopt, background, family and medical history, social environment, reasons for adoption, ability to undertake an intercountry adoption, as well as the characteristics of the children for whom they would be qualified to care.

2. When should this report be drafted?

This report should be prepared once the Central Authority of the receiving State is satisfied that the applicants are eligible and suited to adopt.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts. 9(a), 30 and 31 of the Convention).

3. What about the protection of personal data?

Each State will need to adapt the report according to the State’s own requirements and restrictions relating to the law on data protection.

¹ In general, this Model Form refers to the prospective adoptive parents in the plural form for ease of reference. However, it is also possible to complete the form for a single prospective adoptive parent.
The law of some States may not permit requests or disclosure of some of the information asked in this report. In such situations, the response “cannot be disclosed” may be provided.

4. Is the use of this Model Form compulsory?

No, it is only a Recommended Model Form, which may need to be adapted by each State.
### RECOMMENDED MODEL FORM

**Report on the prospective adoptive parents (Art. 15)**

<table>
<thead>
<tr>
<th>Date of the report</th>
<th>________________</th>
</tr>
</thead>
</table>
| Authority / body issuing the report | Name: ________________  
Address: ________________ |
| Author of the report | Name: ________________  
Function: ________________  
Contact details: ________________ |

**Sources of information upon which this report is based:**
*e.g., individual / joint interviews, home visits, reports of professionals.* For each:
- list the date(s) on which they took place
- identify the persons present
- attach the reports of professionals, where possible (see Section J below)

Please also identify any other persons interviewed for the purposes of this report.
A. IDENTITY OF THE PROSPECTIVE ADOPTIVE PARENTS

General information

<table>
<thead>
<tr>
<th></th>
<th>Prospective adoptive parent (1)</th>
<th>Prospective adoptive parent (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full name</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Date of birth</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Place of birth (city and State)</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Gender</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Nationality(ies)²</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Ethnic origin</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Native language</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Any other languages (indicate level)</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>Highest level of education</td>
<td>_______________________________</td>
<td>_______________________________</td>
</tr>
</tbody>
</table>

Current employment

|                         | Occupation: __________________  | Occupation: __________________ |
|                         | Employer: _____________________ | Employer: ___________________ |
| Employment status (e.g., full-time, part-time): | ___________________ | Employment status (e.g., full-time, part-time): | ___________________
| Date of start of service: | ______________ | Date of start of service: | ______________ |
| Gross yearly income: | ______________ | Gross yearly income: | ______________ |

1 Please note that Sections A to H of this Model Form follow the order set out in Art. 15(1) of the 1993 Adoption Convention concerning the issues which should be addressed in the report on the prospective adoptive parents.

2 Nationality refers to the legal status of an individual belonging to a sovereign State with the legal rights and protection of the sovereign State’s government. In some States this legal status is referred to as ‘citizenship’. References to ‘nationality’ should therefore be understood as including ‘citizenship’.
Contact information

<table>
<thead>
<tr>
<th></th>
<th>Prospective adoptive parent (1)</th>
<th>Prospective adoptive parent (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>______________________________</td>
<td>______________________________</td>
</tr>
<tr>
<td>Telephone number(s)</td>
<td>______________________________</td>
<td>______________________________</td>
</tr>
<tr>
<td>E-mail address(es)</td>
<td>______________________________</td>
<td>______________________________</td>
</tr>
<tr>
<td>Any other contact</td>
<td>______________________________</td>
<td>______________________________</td>
</tr>
<tr>
<td>information</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Civil / marital status of the prospective adoptive parents

1. Please indicate the civil / marital status of the prospective adoptive parent(s):
   - [ ] Married – please provide the place and date of the marriage: ________________
   - [ ] Other legally registered partnership – please provide the date of civil registration: ________________
   - [ ] De facto relationship (i.e., not legally registered, if recognised in the prospective adoptive parents’ place of habitual residence) – please specify when the relationship commenced and when cohabitation commenced: ________________
   - [ ] Single: ________________

Other person(s) living with the prospective adoptive parents

2. Do any children currently live with the prospective adoptive parents?
   - [ ] Yes – For each child, please specify:
     - Full name: ________________
     - Date of birth: ________________
     - Nationality(ies): ________________
     - Whether they are biological, step and/or adopted children (including date of adoption decision and State of origin, where relevant): ________________
     - Whether they are living full-time or part-time with the prospective adoptive parents: ________________
     - Whether they have any particular health concerns: ________________
   - [ ] No

3. Do any other persons currently live with the prospective adoptive parents or are frequently present in the home of the prospective adoptive parents?
   - [ ] Yes – please specify:
     - Full name: ________________
     - Date of birth: ________________
- Nationality(ies): ____________
- Relationship with prospective adoptive parent(s): ____________
- Reason for living with the prospective adoptive parent(s): ____________
- Whether they are living full-time or part-time with the prospective adoptive parents: ____________
- How long they have been living with the prospective adoptive parent(s): ____________
- Whether they have any particular health concerns: ____________

☐ No

4. Does / do the prospective adoptive parent(s) have biological, step and / or adoptive children who are not living with them at all (i.e., not even part-time)?

☐ Yes - please explain why: ____________

☐ No.

B. DETERMINATION OF THE PROSPECTIVE ADOPTIVE PARENTS’ ELIGIBILITY AND SUITABILITY TO ADOPT (ART. 5(a))

Note: if a “Home Study Report” or similar is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section C below.

1. Which authority / body / person has determined that the prospective adoptive parents are “eligible and suited” to adopt:

   Name of authority / body / person (if a person, please include title / function): ____________

   Date of determination: ____________

   Note: please attach any decision / certificate / declaration of eligibility and suitability to adopt which the competent authority / body / person has issued (see Section J below)

2. Please specify for what length of period this determination is valid:

   ☐ Indefinitely, but certain documents upon which it is based are subject to periodic updating (e.g., the home study report is updated periodically) – please specify: ____________

   ☐ For a finite period – please specify the period: ____________

   ☐ Other – please specify: ____________

3. Please specify whether a valid determination could have to be revised (e.g., in case of a move):

   ____________

4. Please describe:

   a. the process which has been undertaken in order to reach this determination:

   ____________
b. the sources of information which have been relied upon - please provide as much detail as possible and / or attach this information to this Report if possible (see Section J below):

- Interviews with the prospective adoptive parents: ________________
- Interviews with any child(ren) in the family home: ________________
- Interviews with significant other persons, if applicable: ________________
- Home visits: ________________
- Medical reports on the prospective adoptive parents, if disclosure is permitted under domestic law: ________________
- Psycho-social assessments of the prospective adoptive parents: ________________
- Criminal / child protection / other background checks of the prospective adoptive parents or others living in the home: ________________
- Family profile / life story, if applicable, of the prospective adoptive parents: ________________
- References: ________________
- Application form of prospective adoptive parents, if disclosure is permitted under domestic law: ________________
- Other – please specify: ________________

5. Please add any other comment concerning the determination of the prospective adoptive parents’ eligibility and suitability to adopt: ________________

C. PROSPECTIVE ADOPTIVE PARENTS’ BACKGROUND, INCLUDING FAMILY HISTORY

Note: if a “Home Study Report” or similar is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section D below.

1. Please list any other significant members of each prospective adoptive parent’s family – e.g., parents, siblings, aunts, uncles, cousins. Describe the quality of the relationships of each prospective adoptive parent with these other family members:
   - Prospective adoptive parent (1): ________________
   - Prospective adoptive parent (2): ________________

2. Describe each prospective adoptive parent’s general experience of childhood. Please include information about any major traumatic events that had an impact on the prospective adoptive parent and any major trauma suffered by the prospective adoptive parent:
   - Prospective adoptive parent (1): ________________
   - Prospective adoptive parent (2): ________________
3. Does either prospective adoptive parent have any specific religious, ethnic or cultural practices?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

4. What are the social activities of each prospective adoptive parent (e.g., hobbies, interests)?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

5. For each prospective adoptive parent what are the professional / employment backgrounds (if applicable) and future ambitions concerning their careers / work plans?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

6. Do the prospective adoptive parents (or any others living in the home) have any history of a) abusive behaviour (whether physically or psychologically); b) addiction or substance abuse; or c) criminal activity? In the case of an affirmative response to any of the above, please provide evidence of rehabilitation:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

7. Please add any other relevant comments concerning the background of each of the prospective adoptive parents:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

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3 E.g., including alcohol, controlled substances or other substances that impair the ability to fulfil obligations at work, school or home, or create other social or interpersonal problems that may adversely affect the suitability as a prospective adoptive parent.

4 In the case of criminal history, why this does not make the prospective adoptive parents unsuitable (e.g., minor offence or unrelated to child raising abilities). Evidence of rehabilitation may include an evaluation of the seriousness of any arrest(s), conviction, or history of abuse, the number of such incidents, the length of time since the last incident, the offender’s acceptance of responsibility for their conduct, and any type of counselling or rehabilitation programmes which have been successfully completed, or a written opinion from an appropriate licensed professional, such as a psychiatrist, clinical psychologist, or clinical social worker.
D. MEDICAL HISTORY AND CURRENT HEALTH OF THE PROSPECTIVE ADOPTIVE PARENTS

Notes:
- if a “Home Study Report” and / or full Medical and / or Psychological Report in relation to each prospective adoptive parent is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section E below.
- if the law of the State does not permit the sharing of all / some of the information below and / or of a full Medical and / or Psychological Report, you may instead send these questions / Report to an authorised professional who will evaluate the situation and indicate if the prospective adoptive parents are suitable to adopt from a medical perspective. You may instead attach this certificate to the Report (see Section J below)

1. Please provide a brief medical history for each prospective adoptive parent:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

2. Describe the current physical health of each prospective adoptive parent, including a) whether they are currently suffering from any illness or condition; b) any physical disability; c) any treatment currently being received:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

3. Describe the current psychiatric and psychological health of each prospective adoptive parent, including: a) any current diagnoses (e.g., personality disorder, mental illness); b) any treatment currently being received:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

4. Are there any illnesses (e.g., hereditary, congenital, mental) in the prospective adoptive parents or their immediate families that may impact them in their ability to care for the child?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

5. Are either of the prospective adoptive parents infertile?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________
6. Please add any other relevant comments concerning the medical history or current health of each prospective adoptive parent:
   - Prospective adoptive parent (1): _______________
   - Prospective adoptive parent (2): _______________

E. SOCIAL ENVIRONMENT OF THE PROSPECTIVE ADOPTIVE PARENTS

Note: if a “Home Study Report” or similar is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section F below.

1. Please briefly describe the financial resources of the prospective adoptive parents, including: income, assets (e.g., savings, properties, monthly budget), any debts:
   - Prospective adoptive parent (1): _______________
   - Prospective adoptive parent (2): _______________

2. If applicable, please briefly describe how the prospective adoptive parents plan to finance the costs of the adoption:
   - Prospective adoptive parent (1): _______________
   - Prospective adoptive parent (2): _______________

3. What is the current work schedule of each prospective adoptive parent? Are there plans to change it after the adoption? Please specify working hours, days off per year, etc: _______________

4. Please describe the home of the prospective adoptive parents: _______________

5. Please describe the prospective adoptive parents’ neighbourhood (e.g., rural or urban, schools available, medical care facilities, security): _______________

6. If applicable, please provide details on the opinion of any children and/or other persons currently living with the prospective adoptive parents concerning the proposed adoption: _______________

7. If possible, please provide details on the opinion of relatives and friends concerning the proposed adoption: _______________

8. If the prospective adoptive parents have any pet, please describe the health condition, immunisation history and characteristics of the pet: _______________
F. PROSPECTIVE ADOPTIVE PARENTS’ REASONS FOR INTERCOUNTRY ADOPTION AND THEIR INTERCOUNTRY ADOPTION PLAN

Note: if a “Home Study Report” or similar is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section G below.

Motivation to adopt a child from another country
1. Please provide a brief description of the prospective adoptive parents’ reasons for wanting to adopt, and particularly their wish to adopt a child from another country: _______________

Counselling and preparation undertaken
2. Have the prospective adoptive parents undergone any counselling in relation to the prospective adoption? _______________

Have the prospective adoptive parents participated in any training course(s) to prepare for adoption, particularly an intercountry adoption? _______________

If so, please specify whether:
   a) the course(s) was / were general or specific to certain profiles of children or States of origin: _______________

   and / or
   b) whether one or both prospective adoptive parents participated in them: _______________

The plan for post-adoption
3. What is the plan for the family adjustment following the adoption (e.g., registration in day care or school, daily routine, parental leave)? _______________

4. Please describe childcare arrangements which have been (or will be) made and who may be involved (e.g., is someone other than the prospective adoptive parents expected to be a regular caregiver?) _______________

5. Please specify whether arrangements have been discussed if something should happen to the prospective adoptive parents (e.g., guardianship): _______________

6. Please describe where it is envisaged that the adopted child will live within the home (e.g., will the adopted child have their own room or share with siblings)? _______________

7. If there are any other children currently living with the prospective adoptive parents, please explain the prospective adoptive parents’ plan for helping the child currently in their care form a relationship with the child they may be adopting? _______________

8. Please specify what, if any, post-adoption services have been identified to support these prospective adoptive parents, and any child living with the prospective adoptive parents? _______________
9. If the State of origin is known, how deep is the prospective adoptive parents’ knowledge of the culture and social situation in the child’s home State? To what extent have they reflected upon this situation? ______________

10. What is the prospective adoptive parents’ plan to integrate the child’s cultural and social background into the family life? ______________

11. What is the prospective adoptive parents’ plan to communicate the fact of the adoption and the child’s origins to the child? ______________

12. What is the prospective adoptive parents’ attitude towards the possibility of the child maintaining links with their biological family? ______________

13. How prospective adoptive parent(s)’ plan to answer any questions the child might have about family types / composition? ______________

For an INTRA-FAMILY / RELATIVE ADOPTION, please specify:

Description of relationship

14. What is the legal relationship between the child(ren) and the prospective adoptive parents (e.g., aunt / niece, grandparent / grandchild)?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

15. What kind of relationship do the prospective adoptive parents already have with the child(ren) (e.g., length and nature of time spent together)?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

Motivation to adopt the particular child

16. Please provide a brief description of the prospective adoptive parents’ reasons for wishing to adopt the child(ren), and why do they apply for an adoption and not another child protection measure:
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________

17. If the prospective adoptive parents have already started establishing a parent-child relationship with the child(ren), what successes and challenges have they already encountered?
   - Prospective adoptive parent (1): ______________
   - Prospective adoptive parent (2): ______________
G. ABILITY OF THE PROSPECTIVE ADOPTIVE PARENTS TO UNDERTAKE AN INTERCOUNTRY ADOPTION

Note: if a “Home Study Report” or similar is attached to this report and covers all the issues set out below, you may simply refer to it and proceed to Section H below.

The personalities of the prospective adoptive parents

1. Please provide a brief description of the personality / character of each prospective adoptive parent:
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________

2. What is their outlook on life and what are their key values?
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________

3. What is their capacity to cope with (1) change and (2) stress within the family?
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________

4. How have they coped with infertility (if applicable)? How have they coped with moving from a project of biological parenthood to a project of adoptive parenthood?
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________

5. Describe the relationship between the prospective adoptive parents: __________

6. Describe the relationship between the prospective adoptive parents and any existing children (if applicable): __________

The parenting skills of the prospective adoptive parents

7. Please provide a brief description of any previous parenting experience of either prospective adoptive parent:
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________

8. What is each prospective adoptive parent’s understanding of children’s needs and development?
   - Prospective adoptive parent (1): __________
   - Prospective adoptive parent (2): __________
9. What is each prospective adoptive parent’s vision of their role as a parent?
   - Prospective adoptive parent (1): ____________
   - Prospective adoptive parent (2): ____________

10. What is each prospective adoptive parent’s vision of their partner’s role as a parent?
    - Prospective adoptive parent (1): ____________
    - Prospective adoptive parent (2): ____________

11. What is each prospective adoptive parent’s approach to education?
    - Prospective adoptive parent (1): ____________
    - Prospective adoptive parent (2): ____________

12. What is each prospective adoptive parent’s expectation regarding raising an adopted child? Explain how they appreciate the different needs of an adopted child:
    - Prospective adoptive parent (1): ____________
    - Prospective adoptive parent (2): ____________

13. How prepared are the prospective adoptive parents to deal with any issues that may arise after the adoption (e.g., adjustment issues, post-traumatic stress, issues concerning ethnicity and racism, a child’s desire to search and contact their birth family members and a child’s desire to travel to their country of origin)? What are the prospective adoptive parents understanding of the effects of these issues, in particular racism? ____________

14. Do the prospective adoptive parents have a support network of persons? ____________

H. CHARACTERISTICS OF THE CHILDREN FOR WHOM THESE PROSPECTIVE ADOPTIVE PARENTS WOULD BE QUALIFIED TO CARE

In light of all the information provided above, please describe, in as much detail as possible, the characteristics or profile of children (e.g., children with special medical or other needs; specific culture or ethnicity of the child) for whom these prospective adoptive parents would be qualified and suited to care and why: ____________

I. ADDITIONAL COMMENTS / RECOMMENDATIONS

Please provide any relevant additional comments or recommendations (e.g., comments from referees, medical professionals): ____________
J. CHECKLIST OF DOCUMENTS TO ATTACH (as applicable)

Where possible, please attach the following documents to this report:

- Copy of birth certificates of the prospective adoptive parents
- Copy of any marriage certificate / civil registration of relationship of the prospective adoptive parents
- Copy of passports of the prospective adoptive parents
- Proof / certificate of the prospective adoptive parents’ habitual residence
- Copy of birth certificates and / or Adoption Order(s) of the prospective adoptive parents’ children
- Any decision / certificate / declaration of the prospective adoptive parents’ eligibility and suitability to adopt which has been issued by the competent authority / body / person
- Any ‘Home Study Report’ (or similar) on the prospective adoptive parents
- Any Psycho-social Assessment / Report on the prospective adoptive parents
- Certificates / Proof of attendance training / preparation / counselling courses of the prospective adoptive parent(s)
- Photographs of the prospective adoptive parents, any children and / or persons living with them, and their family environment
- Family profile / life story of the prospective adoptive parents
- Any references in support of the prospective adoptive parents
- Any relevant information about the possible guardian(s) of the child, should something happen to the prospective adoptive parents

If disclosure of the following documents is permitted by domestic law (i.e., if the following documents are not confidential), please also attach:

- Application form of the prospective adoptive parents
- Any Medical Report(s) on the prospective adoptive parents and on children and / or persons living with them (or certificate of medical suitability – see Section D above)
- Criminal / child protection / other background checks on the prospective adoptive parents
- Proof of financial means of the prospective adoptive parents
- Any post-adoption reports on the prospective adoptive parents’ adopted children (if applicable)
K. CERTIFICATION OF THE AUTHORITY / PERSON AUTHORISED TO COMPLETE THE REPORT

Name: _____________
Title: _____________
Authority: _____________
I hereby certify that the present report is true, correct and complete.

Done at _____________ on _____________
City, State Date

Signature / Seal: _____________
Article 17
Agreement
Recommended Model Form No 8A (SO)

Agreement that the adoption may proceed (Art. 17(c))

State of origin (SO)
State of origin (SO)

ARTICLE 17 OF THE 1993 ADOPTION CONVENTION

Article 17(c)

Any decision in the State of origin that a child should be entrusted to prospective adoptive parents may only be made if - [...]

c) the Central Authorities of both States have agreed that the adoption may proceed; [...]

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?
   This Form includes information about which authority issues the agreement that the adoption may proceed; the verifications that have been made; the agreement of the prospective adoptive parents; the approval of the decision of entrustment if applicable, and the agreement of both authorities that the adoption may proceed.

2. When should this agreement be issued?
   This agreement should be given before the State of origin decides to entrust a child to prospective adoptive parents. Therefore, it should be done before the prospective adoptive parents travel to the State of origin to meet the child.

   Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts. 9(a), 30 and 31 of the Convention).

3. Is the use of this Model Form compulsory?
   No, it is only a recommended Model Form which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Agreement that the adoption may proceed (Art. 17(c))

State of origin

TIMING OF THE AGREEMENT

The agreement under Article 17(c) of the 1993 Adoption Convention may be first provided by the State of origin, or first by the receiving State. In this particular adoption, please specify what is the situation:

☐ State of origin first: The State of origin sends first the Article 17(c) agreement to the receiving State with the proposed match. After the reception of the Article 17(c) agreement of the State of origin, then the receiving State provides its agreement.

OR

☐ receiving State first: The receiving State sends first its Article 17(c) agreement to the State of origin with a notice that the match has been accepted. After the reception of the Article 17(c) agreement of the receiving State, then the State of origin provides its agreement.

1. AUTHORITY

The undersigned _______________

Address: _______________

☐ Central Authority

☐ Public Authority (acting under the authority of the Central Authority)

☐ Adoption Accredited Body (acting under the authority of the Central Authority)

of _______________ (name of the State)

---

1 The timing as to when this form is issued, and of the agreement by the Central Authorities of both the receiving State and the State of origin that the adoption can proceed, in conformity with Art. 17(c) of the 1993 Adoption Convention, may follow different patterns according to domestic practice, so long as all the requirements for agreement under the Convention have been met.
2. **IDENTITY OF THE CHILD AND THE PROSPECTIVE ADOPTIVE PARENT(S)**

   a. **Identity of the child**

      Family name: ____________
      Given name(s): ____________
      Gender: ____________
      Date of birth: ____________
      Place of birth: ____________
      State of habitual residence at the time of the adoption: ____________
      Address: ____________
      Nationality: ____________

   b. **Identity of the prospective adoptive parent(s)**

      Family name of the prospective adoptive parent: ____________
      Given name(s): ____________
      Gender: ____________
      Date of birth: ____________
      Place of birth: ____________
      State of habitual residence at the time of the adoption: ____________
      Address: ____________
      Other contact details: ____________
      Nationality: ____________

      If the child is to be adopted by a couple:

      Family name of the second prospective adoptive parent: ____________
      Given name(s): ____________
      Gender: ____________
      Date of birth: ____________
      Place of birth: ____________
      State of habitual residence at the time of the adoption: ____________
      Address: ____________
      Other contact details: ____________
      Nationality: ____________
3. VERIFICATIONS OF THE ADOPTION PROCEDURE

☐ The **habitual residence** of the child and the habitual residence of the prospective adoptive parents have been verified (see Section 2, above)

☐ Due consideration was given to the **possibilities** of reintegrating the child with their birth family in accordance with the principle of subsidiarity

☐ Due consideration was given to the **possibilities** for domestic placement of the child in accordance with the principle of subsidiarity

☐ The necessary **consents** from persons, institutions and authorities were obtained in accordance with the requirements of the Convention

☐ Having regard for the age and degree of maturity of the **child**, the child was properly **counselling**, consideration was given to the child’s **wishes** and **opinions**, and the child’s **consent** to being adopted in general was obtained²

☐ The child was declared **adoptable** for intercountry adoption by the appropriate authorities

☐ The **report** on the **child**³ contains the information required by the Convention, is complete and up to date, and was transmitted to the receiving State

☐ The **report** on the **prospective adoptive parents**, including the home study conducted by the appropriate social welfare authorities, contains the information required by the Convention, and was transmitted to the State of origin by the receiving State

☐ The **matching**:
   - **was conducted according to a multidisciplinary and impartial procedure**
   - **was conducted in accordance with an impartial procedure and taking into consideration the Reports on the child and the prospective adoptive parents**
   - **was based on the prospective adoptive parents’ apparent capacity to take care of the child’s needs**

---

² Consent should, ideally, be obtained at two stages of the adoption:
   - First, **general consent prior to the child being considered for adoption**, it is important that they consent to being adopted generally (i.e., in order for the child to be mentally prepared to the idea of a possible adoption, but also in order to prevent situations where a child is declared adoptable while that child refuses to be adopted).
   - Second, **consent to a specific adoption**, after the child has been matched with prospective adoptive parents. Indeed, a general consent does not fulfil the requirement under Art. 4(d)(ii) of the Convention, as this requirement for consent must be given in light of the particular prospective adoption. For further information, see G. Parra-Aranguren, *Explanatory Report on the 1993 Adoption Convention* (*Explanatory Report*), para. 161: “[T]he consent of the child, having regard to his or her age and maturity, shall be given not to the adoption in general, but for the specific adoption in a particular case, since it would be against his or her fundamental rights to have the child adopted without even knowing who the adoptive parents are going to be”.

Taking this into consideration, the consent referred to in this section refers to the **first consent and not** to the consent required under Art. 4 of the 1993 Adoption Convention.

³ It is recommended to use the Recommended Model Form on the Report on the child.
was conducted using a reversal of the flow of the files approach

☐ The child has obtained or will obtain permission to leave the State of origin4

☐ No illicit practices in the adoption process have been identified at the stage of giving this agreement, based on the review of the information and documentation collected to complete the adoption

☐ The State of origin respected the procedures and fundamental principles of the Convention, and

☐ The envisaged placement is in the best interests of the child

4. AGREEMENT OF THE PROSPECTIVE ADOPTIVE PARENTS

☐ The prospective adoptive parents agree to the adoption (Art. 17(a)).

5. APPROVAL OF THE DECISION OF ENTRUSTMENT

Check one of the three options:

☐ The Central Authority of the State of origin requires that the Central Authority of the receiving State approves the decision to entrust the child

☐ The Central Authority of the receiving State has approved the decision to entrust the child to the prospective adoptive parents (Art. 17(b))

OR

☐ The law of the receiving State requires that the Central Authority of the receiving State approves the decision to entrust the child

☐ The Central Authority of the receiving State has approved the decision to entrust the child to the prospective adoptive parents (Art. 17(b))

OR

☐ Neither the Central Authority of the State of origin nor the law of the receiving State require the Central Authority of the receiving State to approve the decision to entrust the child

4 I.e., the child has the ability to leave the State of origin.
6. AGREEMENT THAT THE ADOPTION MAY PROCEED

Agrees that the adoption may proceed (Art. 17(c))

7. COMMENTS

Please add any relevant comments: ______________

8. SIGNATURE / SEAL

Name: ______________
Title: ______________
Authority: ______________

Done at ______________ on ______________

City, State Date

Signature / Seal: ______________
Recommended Model Form No 8B (RS)

Agreement that the adoption may proceed (Art. 17(c))

Receiving State (RS)
ARTICLE 17 OF THE 1993 ADOPTION CONVENTION

Article 17(c)

Any decision in the State of origin that a child should be entrusted to prospective adoptive parents may only be made if - [...] 

c) the Central Authorities of both States have agreed that the adoption may proceed; [...] 

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?

This Form includes information about which authority issues the agreement that the adoption may proceed; the verifications that have been made; the agreement of the prospective adoptive parents; the approval of the decision of entrustment if applicable, and the agreement of both authorities that the adoption may proceed.

2. When should this agreement be issued?

This agreement should be given before the State of origin decides to entrust a child to prospective adoptive parents. Therefore, it should be done before the prospective adoptive parents travel to the State of origin to meet the child.

Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts. 9(a), 30 and 31 of the Convention).

3. Is the use of this Model Form compulsory?

No, it is only a recommended Model Form which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Agreement that the adoption may proceed (Art. 17(c))

Receiving State

TIMING OF THE AGREEMENT

The agreement under Article 17(c) of the 1993 Adoption Convention may be first provided by the State of origin, or first by the receiving State. In this particular adoption, please specify what is the situation:

☐ State of origin first: The State of origin sends first the Article 17(c) agreement to the receiving State with the proposed match. After the reception of the Article 17(c) agreement of the State of origin, then the receiving State provides its agreement.

OR

☐ receiving State first: The receiving State sends first its Article 17(c) agreement to the State of origin with a notice that the match has been accepted. After the reception of the Article 17(c) agreement of the receiving State, then the State of origin provides its agreement.

1. AUTHORITY

The undersigned ________________
Address: ________________

☐ Central Authority
☐ Public Authority (acting under the authority of the Central Authority)
☐ Adoption Accredited Body (acting under the authority of the Central Authority)

of ________________ (name of the State)

1 The timing as to when this form is issued, and of the agreement by the Central Authorities of both the receiving State and the State of origin that the adoption can proceed, in conformity with Art. 17(c) of the 1993 Adoption Convention, may follow different patterns according to domestic practice, so long as all the requirements for agreement under the Convention have been met.
2. **IDENTITY OF THE CHILD AND THE PROSPECTIVE ADOPTIVE PARENT(S)**

**a. Identity of the child**

- Family name: ______________
- Given name(s): ______________
- Gender: ______________
- Date of birth: ______________
- Place of birth: ______________
- State of habitual residence at the time of the adoption: ______________
- Address: ______________
- Nationality: ______________

**b. Identity of the prospective adoptive parent(s)**

- Family name of the prospective adoptive parent: ______________
- Given name(s): ______________
- Gender: ______________
- Date of birth: ______________
- Place of birth: ______________
- State of habitual residence at the time of the adoption: ______________
- Address: ______________
- Other contact details: ______________
- Nationality: ______________

If the child is to be adopted by a couple:

- Family name of the second prospective adoptive parent: ______________
- Given name(s): ______________
- Gender: ______________
- Date of birth: ______________
- Place of birth: ______________
- State of habitual residence at the time of the adoption: ______________
- Address: ______________
- Other contact details: ______________
- Nationality: ______________
3. VERIFICATIONS OF THE ADOPTION PROCEDURE

☐ The **habitual residence** of the child and the habitual residence of the prospective adoptive parents have been verified (see Section 2, above)

☐ The **prospective adoptive parents** are **eligible** and **suited** to adopt (Arts 5(a)&(b), 15(1) and 17(d))

☐ The **report on the prospective adoptive parents** includes the home study conducted by the appropriate social welfare authorities, contains the information required by the Convention, is complete and up to date, and was transmitted to the State of origin (Art. 15(2))

☐ The **prospective adoptive parents** were properly **counselling** (Art. 4(c)(1))

☐ The **report on the child** contains the information required by the Convention, and was transmitted to the receiving State by the State of origin (Art. 16)

☐ The **child** is or will be authorised to **enter** and **reside** permanently in the receiving State (Art. 17(d))

☐ **No illicit practices** in the adoption process have been identified at the stage of giving this agreement, based on the review of the information and documentation collected to complete the adoption

☐ The receiving State **respected** the procedures and fundamental principles of the **Convention**, and

☐ The receiving State has been informed by the State of origin that the envisaged placement is in the **best interests of the child**

4. AGREEMENT OF THE PROSPECTIVE ADOPTIVE PARENTS

☐ The **prospective adoptive parents** agree to the adoption

5. APPROVAL OF THE DECISION OF ENTRUSTMENT

Check one of the three options:

☐ The Central Authority of the State of origin requires that the Central Authority of the receiving State approves the decision to entrust the child

---

2 It is recommended to use the Recommended Model Form on the Report on the prospective adoptive parents.
The Central Authority of the receiving State has approved the decision to entrust the child to the prospective adoptive parents (Art. 17(b))

OR

The law of the receiving State requires that the Central Authority of the receiving State approves the decision to entrust the child

The Central Authority of the receiving State has approved the decision to entrust the child to the prospective adoptive parents (Art. 17(b))

OR

Neither the Central Authority of the State of origin nor the law of the receiving State require the Central Authority of the receiving State to approve the decision to entrust the child

6. AGREEMENT THAT THE ADOPTION MAY PROCEED

Agrees that the adoption may proceed (Art. 17(c))

7. COMMENTS

Please add any relevant comments: ______________

8. SIGNATURE / SEAL

Name: ________________

Title: ________________

Authority: ________________

Done at ________________ on ________________

City, State Date

Signature / Seal: ________________
Article 23
Certificate
Recommended Model Form No 9

Certificate of conformity of intercountry adoption with the 1993 Adoption Convention (Art. 23)
Recommended Model Form No 9
Certificate of conformity of intercountry adoption with the 1993 Adoption Convention (Art. 23)

ARTICLE 23 OF THE 1993 ADOPTION CONVENTION

Article 23

(1) An adoption certified by the competent authority of the State of the adoption as having been made in accordance with the Convention shall be recognised by operation of law in the other Contracting States. The certificate shall specify when and by whom the agreements under Article 17, sub-paragraph c), were given.

(2) Each Contracting State shall, at the time of signature, ratification, acceptance, approval or accession, notify the depositary of the Convention of the identity and the functions of the authority or the authorities which, in that State, are competent to make the certification. It shall also notify the depositary of any modification in the designation of these authorities.

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?

This Form includes key information about the adoption, namely the identification of the child and the adoptive parent(s); the decision of adoption made by the competent authority; the certification by the authority that the adoption was made in accordance with the Convention and that the agreements under Article 17(c) were given; and if the adoption terminated, or not, the pre-existing legal parent-child relationship.

The certificate of conformity is an important document which provides proof that the adoption is entitled to automatic recognition in all other Contracting States.¹

2. When should this Model Form be used?

The certificate of conformity is issued by the State which completes the adoption.²

It must be issued by a competent authority after the adoption is finalised. It should be issued promptly.³

¹ See Guide to Good Practice No 1, para. 437.
² Ibid.
³ Ibid., para. 383.
3. Is the use of this Model Form compulsory?

No, it is only a Recommended Model Form, which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Certificate of conformity of intercountry adoption with the 1993 Adoption Convention (Art. 23)

The undersigned authority: ______________

Hereby certifies that the child:

Family name: ______________
Given name(s): ______________
Gender: ______________
Date of birth: ______________
Place of birth: ______________
Habitual residence: ______________

Was adopted according to the decision of the following authority:

Date of the decision: ______________
Date at which the decision became final: ______________

If the adoption was made otherwise than by a decision of an authority, please specify the equivalent details: ______________.

By the following person(s):

a. Family name of adoptive parent 1:
   Given name(s): ______________
   Date of birth: ______________
   Place of birth: ______________
   Habitual residence at the time of the adoption: ______________.

b. Family name of adoptive parent 2:
   Given name(s): ______________
   Date of birth: ______________
   Place of birth: ______________
   Habitual residence at the time of the adoption: ______________.
The undersigned authority certifies that the adoption was made in accordance with the Convention and that the agreements under Article 17(c), were given by:

a. Name and address of the Central Authority of the State of origin: _______________.
   Date of the agreement: _______________.

b. Name and address of the Central Authority of the receiving State: _______________.
   Date of the agreement: _______________.

☐ The adoption had the effect of terminating the pre-existing legal parent-child relationship.

OR

☐ The adoption did not have the effect of terminating the pre-existing legal parent-child relationship.

Done at _______________ on _______________.

City, State Date

Signature / Seal: _______________
Recommended Model Form No 10

Certificate of conformity following the conversion of a simple adoption to a full adoption (Arts 23 & 27)

Receiving States only
ARTICLE 27 OF THE 1993 ADOPTION CONVENTION

Article 27

(1) Where an adoption granted in the State of origin does not have the effect of terminating a pre-existing legal parent-child relationship, it may, in the receiving State which recognises the adoption under the Convention, be converted into an adoption having such an effect -

a) if the law of the receiving State so permits; and
b) if the consents referred to in Article 4, sub-paragraphs (c) and (d), have been or are given for the purpose of such an adoption.

(2) Article 23 applies to the decision converting the adoption.

EXPLANATORY SECTION

1. What has been included in this Recommended Model Form?

This Form includes information about what needs to be included in the new Certificate of Conformity of an adoption when a simple adoption has been converted into a full adoption in the receiving State.

2. When should the Certificate of Conformity be issued?

The Certificate of Conformity should only be used in cases where a simple adoption made under the 1993 Adoption Convention has been converted into a full adoption in a receiving State.

---

1 This Certificate of Conformity is to be completed in the receiving State only, to be issued after the conversion of a simple adoption to a full adoption in the receiving State in accordance with Art. 27 of the 1993 Adoption Convention.

A **simple adoption** is an adoption which does NOT sever the legal ties between the child and their biological parents or legal guardian(s).

A **full adoption** is an adoption which severs the legal ties between the child and their biological parents or legal guardian(s). For further information, see 1993 Adoption Convention and Guide to Good Practice No. 1, Chapter 8.8.8.
Competent authorities of the relevant Contracting State should ensure that this form is preserved (see Arts 9(a), 30 and 31 of the Convention).

3. **Is the use of this Model Form compulsory?**

No, it is only a recommended Model Form, which may need to be adapted by each State.
RECOMMENDED MODEL FORM

Certificate of conformity following the conversion of a simple adoption to a full adoption (Arts 23 & 27)

Receiving States only

A. AUTHORITY PROVIDING THE CERTIFICATION IN THE RECEIVING STATE

<table>
<thead>
<tr>
<th>Receiving State</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authority / body providing the certification</td>
<td>Name:</td>
</tr>
<tr>
<td>Official completing the form</td>
<td>Name:</td>
</tr>
</tbody>
</table>

B. THE CHILD

1. Full name at birth: 
2. Current full name: 
3. Date of birth: 
4. Place of birth: 
5. Gender: 
6. Address: 
7. Date of arrival of the child in the receiving State: 
C. THE ADOPTIVE FAMILY

Full name(s) of adoptive parents: _______________

D. THE SIMPLE ADOPTION GRANTED IN THE STATE OF ORIGIN

Note: Please attach a copy of the simple adoption decision to this certificate.

1. Competent authority which granted the simple adoption decision: _______________

2. Date of the simple adoption decision: _______________

3. Birth parents of the child at the time of the simple adoption (with whom a legal tie has been retained until the full adoption): _______________

E. GENERAL VERIFICATIONS TO CONVERT A SIMPLE ADOPTION INTO A FULL ADOPTION

☐ The simple adoption was granted in the State of origin.

☐ The simple adoption did not have the effect of terminating a pre-existing legal relationship between the child and their mother and father (Arts 26(1)(c) and 27(1)).

☐ The simple adoption was automatically recognised by the receiving State under the 1993 Adoption Convention (Art. 27(1)).

☐ The law of the receiving State permits the conversion of the simple adoption to a full adoption (Art. 27(1)(a)).

1 The receiving State shall apply its own law to decide whether or not it should take place.
F. CONSENTS TO CONVERT A SIMPLE ADOPTION INTO A FULL ADOPTION

The following consents have been or are given for the purpose of a full adoption:

☐ Consent of the **persons, institutions and authorities** whose consent is necessary for adoption (Art. 4(c)). Please attach the relevant statement of consent for a full adoption or for the conversion into a full adoption.

☐ Consent of the **child**, where required by law. Please attach the relevant statement of consent for a full adoption or for the conversion into a full adoption.

☐ The persons (including the child, if their consent is required by law), institutions and authorities whose consent is necessary for adoption have been duly counselled and informed of the effects of a full adoption and of their consent (Arts 4(c) and (d)).

G. FULL ADOPTION

*Note: please attach the decision on the conversion of the simple to full adoption to this certificate.*

1. Name of the competent authority which converted the simple adoption into a **full adoption decision**: _______________

2. Date of the **full adoption conversion decision**: _______________

H. CERTIFICATION

Name: _______________
Title: _______________
Authority: _______________

---

See Art. 27(2)(b) of the 1993 Adoption Convention, which requires that the "consents referred to in Article 4, sub-paragraphs (c) and (d), have been or are given for the purpose of such an adoption." The relevant competent authorities are encouraged to use an adapted version of the recommended model form on consent (i.e., statement of consent to the adoption; statement of consent of the child to the adoption).
☐ I hereby certify that the conversion of the simple to full adoption for ____________ (child’s full name) has been done in conformity with Article 27 of the 1993 Adoption Convention.

☐ I hereby certify that the adoption was made in accordance with the 1993 Adoption Convention.

Done at ______________ on ______________

City, State Date

Signature / Seal: ______________