

Kentucky Adoption Services, Inc.

3808 South Griffith Ave.

Owensboro, KY 42301

(270) 684-2598 or (866) KIDS-4-KY

fax – (270) 684-6748

www.kentuckyadoptionservices.org

PRELIMINARY APPLICATION FOR ADOPTION SERVICES

*A non-refundable \$50 processing fee is due with this application

NAME:

Adoptive

Father _____

(first)

(middle)

(last)

Adoptive

Mother _____

(first)

(middle)

(last)

(maiden)

Address _____

(street)

(city)

(state)

(zip code)

How long have you resided at the above address? _____

Please list all previous addresses for both applicants for the past 10 years and the dates of residence. If you are unable to recall the street names, please include the city and state.

Home Phone _____ Fax Number _____

Cell Phone-Father's _____ Cell Phone-Mother's _____

Father's Work Phone _____ Mother's Work Phone _____

Father's E-mail Address _____ Mother's E-mail Address _____

Is it alright to call you at work? Father _____ Mother _____

What is the best times to reach you and where? _____

Date of marriage _____ Place of marriage _____

Please list all the members of your household, including their age and their relationship to each of the adoptive applicants.

Father's Information:

Date of Birth _____ Place of Birth _____

Social Security Number _____ Race _____

Highest Level of Education Obtained _____

Name of College and major (if applicable) _____

Occupation _____ Employer _____

Address of Employer _____

How long have you been employed by the above employer? _____

Weekly hours worked _____

Approximate Yearly Income _____

Religion _____

Have you been married previously? _____

If yes, please list the dates of prior marriages. _____

Are there any children from a prior marriage or relationship? _____

If yes, please list living and custody arrangements _____

Mother's Information:

Date of Birth _____ Place of Birth _____

Social Security Number _____ Race _____

Highest Level of Education Obtained _____

Name of College and major (if applicable) _____

Occupation _____ Employer _____

Address of Employer _____

How long have you been employed by the above employer? _____

Weekly hours worked _____

Approximate Yearly Income _____

Religion _____

Have you been married previously? _____

If yes, please list the dates of prior marriages. _____

Are there any children from a prior marriage or relationship? _____

If yes, please list living and custody arrangements _____

Adoption Information:

Are you considering international adoption? _____

If yes, from which country? _____

Have you chosen a placement agency? If yes, please list. _____

Age of child you are interested in adopting _____

Sex of child you are interested in adopting _____

Are you considering trans-racial adoption? _____

Are you considering special needs adoption? _____

Have you adopted before? _____

How did you hear of our adoption services?

The Yellow Pages _____ Radio Ad _____ Personal Referral _____

Another Phone Book _____ Newspaper _____ Physician Referral _____

Other _____

Please use your browsers PRINT BUTTON to print this document, then complete and mail this application to:

Kentucky Adoption Services, Inc.
3808 South Griffith Avenue
Owensboro, KY 42301

A non-refundable \$50 processing fee is due with this application.

For Office Use Only:

This application was obtained online at <http://www.kentuckyadoptionservices.org/> Please send a KAS Guide to Services.