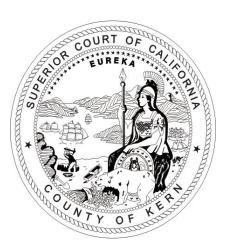
SUPERIOR COURT OF CALIFORNIA COUNTY OF KERN



Family Court Services Patricia Arredondo, LCSW Manager

1215 Truxtun Avenue, Room 301 Telephone: (661) 610-6700 Facsimile: (661) 688-6714 Email: FCS@kern.courts.ca.gov

Requirements For Your Petition for Step Parent Adoption

Deciding to adopt a stepchild is a big step in the life of a family. Taking this step brings with it certain requirements in order for your petition to be granted and the adoption occur. This document outlines some of those requirements. Please be aware that the judge may require other things of you before the petition is granted. For example, you may need to comply with the Indian Child Welfare Act if there is a possibility that the children have Native American Ancestry. The Superior Court of California, County of Kern wants to ensure that all laws and procedures are followed to ensure that your case is not subject to appellate review or the possibility of it being overturned in such a review.

Investigation

Before initiating an investigation, the petition must be submitted to the Family Law Department and assigned a court case number. You and the minor children involved in the petition shall meet with an investigator from the Family Court Services' staff to answer questions related to your desire to adopt. All petitions must be investigated and a report filed with the court. Family Law Code 9001 outlines this requirement.

Questionnaire and Other Documents

Your case will not be assigned until you have completed the attached questionnaire. Additionally, you must provide:

- Copies of any family law orders showing the parent retaining custody has legal custody of the minors
- A copy of **all** decrees of dissolution for the petitioner and the parent retaining custody
- A death certificate for the other parent, if applicable
- Four letters of reference depicting the moral character, attitude and behavior of the stepparent toward the minors and the length of time the witness has known the petitioner. These references must be from non-relatives.

Family Court Services does not keep copies of supporting documents during the course of the investigation. It is the responsibility of the petitioner to request any original documents from the assigned investigator.

Consents or Termination of the Other Parent's Rights

Before a stepparent adoption can occur, the other parent must consent to the adoption or have had

the legal rights to the children terminated. If you think the other parent will consent to the adoption, Family Court Services will mail the appropriate documentation to the other parent with instructions for completing the consent form.

If the other parent does not consent, you will be required to file a petition to terminate the other parent's legal rights with this court. Termination of parental rights is a serious legal process with its own set of requirements including a separate investigation and associated fees plus court hearings. There is a waiting period following the granting of the termination before an adoption can be heard so be aware that this can become a lengthy process.

If the other parent is deceased, neither a consent nor termination is required.

Informing Minors

The minors need to understand the nature of the petition as they will be questioned by the investigator and required to appear in court for the hearing on the adoption. If a minor is 12 years of age or older, their consent is required and they will be asked to sign a consent form at the time of the interview with Family Court Services. *It is your responsibility to explain the purpose of the petition to the children*.

Court employees are unable to provide you with specific legal advice.

<u>CHILD</u>:

Full Legal	Name	
Age	Birth date	Place of Birth
Name of S	School or Daycare	School Phone #
		Achievement & Adjustment (include special needs)
Health (ind	clude medical problems, curren	t medications, & name of M.D.)
Treating C	Counselor, Psychologist, a	nd/or Psychiatrist (include name, phone number, and reason for treatment)
Sports, Sc	ocial Organizations, & Fav	orite Activities:
Child's Fe	eelings and Thoughts Cond	cerning the Proceeding
	's language of preference _	

PETITIONER'S / STEP PARENT'S HISTORY:

Name	(List maiden or other names)				
Address	City		_State	Zip	
Date of Birth	_ Place of Birth			Race	
Home Telephone #	Cell Phone #	Email Ac	ldress		
Driver's License (State & #)		U.S. Citizen	Resi	dent Alien_	
Social Security #:	Languag	ge of preference			_
Served in MilitaryYes	_No Branch	From _		To	
Discharge Status	High School (name/loca	ntion)			
Highest Grade Completed / Ye	ear Graduated /	Graduate:	_Yes	No	_G.E.D.
College (name/location)			_ Degree	e(s)	
Employer		Telepł	none #		
Job Title	Salary	I	Date Bega	n	
Sports & Social Organizations			Heal	th	
Therapist/M. D. (name, phone #,	medications, reason for treatme	nt)			
Arrest Record (date & charges) _					
Current Marriage: Spouse's N	ame]	Date Bega	an	
Place	Children In Common	(list name, birth date of	& place of l	oirth)	
Previous Marriage: Date	Spouse's N	lame			
Place	Date Dissolved	P	lace		
Children In Common (list name	s, birthdates & place of birth) _				

List additional marriages on reverse side with all required information as above. Also, list any children resulting from a non marital relationship (include name, birth date, place of birth, and current custody/visitation order)

NON-CUSTODIAL PARENT:

Name	(List maiden or other names)			
Address	City	State	_Zip	
Date of Birth Place of Birth		Race		
Home Telephone #	Cell Phone #	_ Social Security #		
Driver's License (State & #)		_ Served in Military	YesNo	
Branch I	From To	Discharge Statu	IS	
Height Weight	Hair Color	Eye Color		
The parent's language of prefer	ence			
Is the parent deceased? Yes	No Is the parent cons	enting to the stepparent a	doption? Yes	_No
Is there a Termination of Paren	tal Rights judgement? Yes	_ No		
Employer & Job Title		Teleph	one #	
If location of parent is unknown	n, list name, address, and phone	# of any known relatives	or friends below.	
Arrest Record (date & charges)				
Date this parent last had contac	t with the child(ren)			
Date parent last paid child supp	ort Amour	t of Back Child Support	Owed \$	
(If District Attorney collects child	support, attach a current DA printe	out showing payment history	and current balance	ce owed.)
Date this parent last sent a lette	r, postcard, or gave a gift to this	children		
	meCh			
	s Name			

List additional marriages on reverse side with all required information as above. Also, list any children resulting from non marital relationships (include name, birth date, place of birth, and current custody/visitation order)

LEGAL PARENT RETAINING CUSTODY: (if different than parent retaining custody)

Name	(List maiden or other names)		
Address	City	State	Zip
Date of Birth	Place of Birth		Race
Language of preference			
Home Telephone #	Cell Phone#	_Email Address: _	
Driver's License (State & #)		U.S. Citizen	_Resident Alien
Served in MilitaryYes	No Branch	From	То
Discharge Status	_ High School (name/location)		
Highest Grade Completed / Yea	r Graduated Grad	luate:Yes	NoG.E.D
College (name/location)		Degr	ee(s)
Employer		Telephone #	
Job Title	Salary	Date Begar	1
Sports & Social Organizations _		Healt	h
Therapist/M. D. (name, phone #	, medications, reason for treatment)	
Arrest Record (date & charges)			
Current Marriage: Spouse's Nar	ne	Date Bega	n
Place	Children In Common (list name	, birth date & place	e of birth)
Previous Marriage: Date	Spouse's Name		
Place	Date Dissolved	Place	
Children In Common (list name	s, birthdates & place of birth)		

List additional marriages on reverse side with all required information as above. Also, list any children resulting from a non marital relationship (include name, birth date, place of birth, and current custody/visitation order)

<u>HOME INFORMATION</u>:

Residence Location		
Buying Renting _	Own Month	& Year Moved In
Rent/Payment Amount Number of Bedrooms		
Names and Birthdates	of Other Residents In	The Home
List Residence Locatio	n For The Last Five Y	ears (if different than present):
1. From:	To:	Address (city & state)
2. From:	To:	Address (city & state)
3. From:	To:	Address (city & state)
4. From:	To:	Address (city & state)

ADDITIONAL INFORMATION:

Has either parent or guardian ever been contacted by Children's Protective Services?

Yes _____ No _____ If yes, please explain:

Date _____ Explanation _____

INFORMATION RELEASE

I, ______, specifically authorize any public agency, private person, employer or past employer, medical doctor, psychologist, treating therapist, hospital, public or private school districts (including teachers) possessing information about me or my minor children, including psychiatric information, confidential or otherwise, to release same (including copies) to the Superior Court through its duly appointed Court Evaluator/Investigator, such information to be used as the Court may deem fit and proper.

A copy of this release shall be as valid as the original.

This release shall remain in effect for one year from this date unless otherwise revoked.

Date

Petitioner's Signature

Petitioner's Name (Please Print)

INFORMATION RELEASE

I, _______, specifically authorize any public agency, private person, employer or past employer, medical doctor, psychologist, treating therapist, hospital, public or private school districts (including teachers) possessing information about me or my minor children, including psychiatric information, confidential or otherwise, to release same (including copies) to the Superior Court through its duly appointed Court Evaluator/Investigator, such information to be used as the Court may deem fit and proper.

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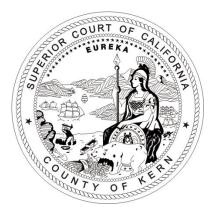
This release shall remain in effect for one year from this date unless otherwise revoked.

Date

Parent Retaining Custody Signature

Parent Retaining Custody Name (Please Print)

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I understand that I am being asked to provide my Social Security number so that the investigator can conduct a criminal background check, which will assist the investigator in making recommendations to the court and the court to make decisions in my case. The results of this criminal search will be included in the report made to the court and only Family Court Services' staff will have access to this information. The investigator will redact your Social Security number from the Family Court Services' file at the conclusion of the investigation to ensure it is not misused. While the court cannot require that you provide Family Court Services with your Social Security number, it is a great help in obtaining accurate information about your criminal background.

Please indicate your choice, and date and complete this form.

I agree to provide my Social Security number

I will not provide my Social Security number

Date:

Signature:_____

Printed Name: _____

(To be completed by the Petitioner)