

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division of Public and Behavioral Health

Helping people. It's who we are and what we do.



# **REPORT OF ADOPTION**

PART 1 - ADOPTEE'S INFORMATION									
The information in this birth record.	s section must be given as	it was <i>before</i> the ac	loption	, if known. Without this information i	t may be imp	ossible to locate	and amend	the adoptee's	
	Adoptee First Name		Adoptee Middle Name		Adoptee Last Name				
Adoptee	Adoptee Date of Birth		Adoptee Place of Birth (City or Hospital)		Adoptee State of Birth Adoptee Sex		Adoptee Sex		
	Birth Parent #1 First Name		Birth Parent #1 Middle Name		Birth Parent #1 Last - Maiden Name				
Birth Parents	Birth Parent #2 First Name		Birth Parent #2 Middle Name		Birth Parent #2 Last – Maiden Name				
PART 2 - ADOPTIVE PARENTS' INFORMATION Adopting parents must furnish the following information on themselves. The information will be used to prepare a new birth certificate. PLEASE DO NOT USE INITIALS.									
PARENT (1) INFORMATION									
Check the Appropriate Box:									
First Name	Middle Name		Last Name Last Name - Prior to First Ma				Marriage		
Date of Birth	Place of Birth (State or Country)			Current Occupation (type of work - not employer)			Social Security Number		
Residence at the Time of Adoptee's	State			County			City or Town		
Birth	Street Address				ZIP Code	Inside Cit			
Current Mailing Address (Street, City, State & ZIP)						Telephone Number			
PARENT (2) INFORMATION									
Check the Appropriate Box: □ Adoptive Parent □ Biological Parent   First Name Middle Last Last Name - Prior to First Marriage									
Date of Birth Place of Birth (State or Country)			Current Occupation (type of work - not employer)			Social Security Number			
SIGNATURE OF PARENT VERIFYING INFORMATION IN PART 2 IS CORRECT									
First Name (print) Last Name (print)			Signature of Parent Verifying Information						
ATTORNEY OF RECORD INFORMATION									
First Name	Last Name	Phone Number	Maili	ng Address (Street, City, State & ZIP)					
PART 3 – COURT CLERK'S CERTIFICATION									
The clerk of the court requires all available information in Parts 1 and 2 above, before completing and certifying Part 3.									
I hereby certify that the child identified above was adopted by the above-named parent(s) on the day of, 20									
and is now to bear the name of								et forth in	
the decree of adoption made on that day in case number in County, Nevada.									
Signature and Seal of County Clerk									
Date Signed									
PART 4 – MAILING COMPLETED NEW BIRTH CERTIFICATES (REQUIRED): When completed, the new birth certificate will be mailed to the following person and address:									
Addressee's Last Name Addressee's Last Name									



ZIP

## Instructions

Please submit all necessary documentation as detailed below with payment to process your adoption request.

### Part 1: Adoptee's Information

The information in this section must be given as it was at the time of birth (before the adoption) to locate the birth record.

- Name of Adoptee at the time of birth No Initials
- Adoptee's Birth Information
- Birth Parents' Information No Initials

## Part 2: Adopting Parents' Information

Please enter the adoptive parents' information.

- Do not use initials as this will cause your paperwork to be returned.
- Enter the last name prior to first marriage. Please do not leave it blank.
- In the Occupation field, enter the type of work not the employer of the adoptive parents. Without the adoptive parents' occupational data, the birth parents' occupations will remain on the birth record.
- Enter current complete mailing address including city, state and ZIP code.
- Enter Parent 1's full address at the time of the Adoptee's birth.
- Signature of parent verifying the information in Part 2 is correct.
- Attorney of Record's information. This is the person that is assisting with the adoption.

### Part 3: Court Clerk's Authorization

The court clerk will complete Part 3.

### Part 4: Address to Return Completed Certificate (Required)

The new birth certificate will be mailed to the current address listed in Part 2 unless a different address is requested in Part 4. Please allow four to six weeks (4-6) weeks to process your request.

#### **Required Documentation (Must be included with the Report of Adoption):**

- For adoptees born and adopted in Nevada and/or in another state, submit each of the following:
  - Report of Adoption and certificate by the court clerk
  - Certified U.S. District Court Order Decree of Adoption
  - Proper Filing Fee (see below)
- For adoptees born in a foreign country, other than Canada and adopted in Nevada, submit each of the following:
  - Report of Adoption
  - Certified U.S. District Court Order Decree of Adoption
  - Evidence the adoptive parents are Nevada Residents such as an original utility bill.
  - Proof the adoptee is a U.S. Citizen.
  - Proper Filing Fee

#### **General Information**

- Common Reasons for Rejections: Cross-outs, white outs, corrections or lack of payment
- Fees: Filing Fee \$45.00 (Includes one (1) certified copy of the amended birth record.)
- Additional Copies \$25.00 each.
- Mail Documents and Fees to:

Office of Vital Records & Statistics Attn: Adoptions 4150 Technology Way, Ste 104 Carson City, Nevada 89706

For More Information: Visit the website at <u>http://dpbh.nv.gov/Programs/VitalRecords/</u> or call the Office of Vital Records and Statistics at (775) 684-4242.



