

# ADOPT-215 Adoption Order

Clerk stamps date here when form is filed.

1 Your name (adopting parent):

a. \_\_\_\_\_

b. \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Street address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime telephone number: (\_\_\_\_) \_\_\_\_\_

Lawyer (if any): (Name, address, telephone number, and State Bar number): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2 Type of adoption: (Check one)

Agency (name): \_\_\_\_\_

Independent

International (name of agency): \_\_\_\_\_

Stepparent

Relative

3 Child's name after adoption:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Place of birth: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

4 Name of adoption agency (if any): \_\_\_\_\_

5 Hearing date: \_\_\_\_\_

Dept.: \_\_\_\_\_ Div.: \_\_\_\_\_ Rm.: \_\_\_\_\_ Judge: \_\_\_\_\_

Clerk's office telephone number: (\_\_\_\_) \_\_\_\_\_

6 People present at the hearing:

Adopting parents  Lawyer for adopting parents

Child  Child's lawyer

Parent keeping parental rights (stepparent/domestic partner): \_\_\_\_\_

Other people present (list each name and relationship to child):

a. \_\_\_\_\_

b. \_\_\_\_\_

If there are more names, attach a sheet of paper, write "ADOPT-215, Item 6" at the top, and list the additional names and each person's relationship to child.

**Judge will fill out section below.**

7 The judge finds that the child: (Check all that apply)

a.  Is 12 or older and agrees to the adoption

b.  Is under 12

Fill in court name and street address:

Superior Court of California, County of

Fill in case number if known:

Case Number:

Your name: \_\_\_\_\_

- 8 The judge has reviewed the report and other documents and evidence and finds that each adopting parent:
  - a. Is at least 10 years older than the child
  - b. Will treat the child as his or her own
  - c. Will support and care for the child
  - d. Has a suitable home for the child *and*
  - e. Agrees to adopt the child

- 9  This case is a relative adoption petitioned under Family Code section 8714.5.
  - The adopting relative  The child, who is 12 or older, has requested that the child's name before adoption be listed on this order. (*Fam. Code, § 8714.5(g).*)

The child's name before adoption was:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

- 10  The child is an Indian child. The judge finds that this adoption meets the placement requirements of the Indian Child Welfare Act and that there is good cause to give preference to these adopting parents. The clerk will fill out 13 below.

- 11  The judge approves the *Contact After Adoption Agreement* (ADOPT-310)
  - As submitted  As amended on ADOPT-310

- 12 The judge believes the adoption is in the child's best interest and orders this adoption.

The child's name after adoption will be:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

The adopting parent or parents and the child are now parent and child under the law, with all the rights and duties of the parent-child relationship.

Date: \_\_\_\_\_

\_\_\_\_\_  
Judge (or Judicial Officer)

**Clerk will fill out section below.**

13 **Clerk's Certificate of Mailing**

For the adoption of an Indian child, the Clerk certifies:

I am not a party to this adoption. I placed a filed copy of:

- ADOPT-200, *Adoption Request*  ADOPT-220, *Adoption of Indian Child*
- ADOPT-215, *Adoption Order*  ADOPT-310, *Contact After Adoption Agreement*

in a sealed envelope, marked "Confidential" and addressed to:

Chief, Division of Social Services  
Bureau of Indian Affairs  
1849 C Street, NW  
Mail Stop 310-SIB  
Washington, DC 20240

The envelope was mailed by U.S. mail, with full postage, from:

Place: \_\_\_\_\_ on (date): \_\_\_\_\_

Date: \_\_\_\_\_ Clerk, by: \_\_\_\_\_, Deputy