

## Adoptive Placement Preference Form

NAME: \_\_\_\_\_

Please read the following questions carefully and answer them honestly. The information will serve as a guideline when we consider submitting your Family Profile to birthparents. We encourage you to seek outside consultation with a physician. Plan to review this information with your social worker during your Homestudy.

1. As potential adoptive parents, it is important to be aware of your strengths and limitations. After thoughtful consideration, please check any of the factors you would or would not consider in a child based on your ability to meet his or her needs.

Although you have completed the following questions on your Initial Application, please review and complete with your current selection preferences.

	<b>YES</b>	<b>NO</b>
A. African-American	<input type="checkbox"/>	<input type="checkbox"/>
B. Caucasian	<input type="checkbox"/>	<input type="checkbox"/>
C. Bi-racial (African-American/Caucasian)	<input type="checkbox"/>	<input type="checkbox"/>
D. Asian	<input type="checkbox"/>	<input type="checkbox"/>
E. Hispanic	<input type="checkbox"/>	<input type="checkbox"/>
F. Native American	<input type="checkbox"/>	<input type="checkbox"/>
G. Multi-Racial (specify)	<input type="checkbox"/>	<input type="checkbox"/>
_____		
H. Newborn (0-6 weeks)	<input type="checkbox"/>	<input type="checkbox"/>
I. Infant (6 weeks -6 months)	<input type="checkbox"/>	<input type="checkbox"/>
J. Infant (6 months – one year)	<input type="checkbox"/>	<input type="checkbox"/>
K. Over 1 year	<input type="checkbox"/>	<input type="checkbox"/>
L. Twins	<input type="checkbox"/>	<input type="checkbox"/>

1. Would you parent a child who is the product of rape? Please explain:

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2. Would you accept a premature infant? (With the understanding that a full term gestational period is 40 weeks.)

24-28 weeks	<input type="checkbox"/>	<input type="checkbox"/>
28-32 weeks	<input type="checkbox"/>	<input type="checkbox"/>
32-36 weeks	<input type="checkbox"/>	<input type="checkbox"/>
36-38 weeks	<input type="checkbox"/>	<input type="checkbox"/>
38-40 weeks	<input type="checkbox"/>	<input type="checkbox"/>

• Will your insurance cover a premature infant? \_\_\_\_\_

3. Recognizing that drugs are sometimes used by birthparents, describe what level of pre-natal drug activity would be acceptable. Please include the type and frequency of substances such as alcohol, marijuana, cocaine, crack, and other unprescribed drugs. We encourage you to discuss this with your physician.

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4. Would you consider mental illness in birthparent or extended families? If so, what types? (i.e. depression, bi-polar, schizophrenia) Please explain.

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5. What degree, if any, of openness would you be comfortable with in your adoption plan? Please discuss issues such as conference calls, meetings before and/or after placement or presence. At the hospital and/or labor and delivery, and ongoing exchange of pictures and letters.

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