

<b>STATE OF MICHIGAN</b> <b>JUDICIAL CIRCUIT - FAMILY DIVISION</b> <b>COUNTY</b>	<b>CERTIFICATE OF ADOPTIVE INFORMATION</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_ DOB: \_\_\_\_\_  
Full name of child

1. The tribal affiliation of the child is \_\_\_\_\_ .

2. The names and addresses of the biological parents of the child are:

\_\_\_\_\_  
Name of biological father (type or print)

\_\_\_\_\_  
Name of biological mother (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, and zip

\_\_\_\_\_  
City, state, and zip

3. The names and addresses of the adoptive parents of the child are:

\_\_\_\_\_  
Name of adoptive parent (type or print)

\_\_\_\_\_  
Name of adoptive parent (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, and zip

\_\_\_\_\_  
City, state, and zip

4. Agency Contact Information:

\_\_\_\_\_  
Name of agency representative (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Agency name

\_\_\_\_\_  
City, state, zip

\_\_\_\_\_  
Telephone no.

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of court representative

\_\_\_\_\_  
Name (type or print)

☐ Adoption decree attached.

☐ Statement of Identifying Information attached.

☐ Request for Confidentiality attached.

Do not write below this line - For court use only