



# LUTHERAN SOCIAL SERVICES OF THE NATIONAL CAPITAL AREA

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(All families residing in DC or Maryland, please submit your application to the DC office. All families residing in Virginia should submit their application to the Virginia office.)

## PRELIMINARY ADOPTION APPLICATION

**PLEASE PRINT**

Parent 1's Full Name

Social Security Number

Parent 2's Full Name

Social Security Number

Street Address

City

State

Zip

County

Home Telephone Number

Parent 1's work/cell #

Parent 2's Work/cell #

Date and Place of Marriage

Race(s)

Religion(s)

### **Previous Adoption Home Studies:**

Name of Agency

Date

Approved ☐ Denied ☐

Name of Agency

Date

Approved ☐ Denied ☐

### **Personal Information:**

**PARENT 1**

**PARENT 2**

Birthdate: \_\_\_\_\_

County of Birth: \_\_\_\_\_

City and State: \_\_\_\_\_

U.S. Citizen: \_\_\_\_\_

If Naturalized, Give Place, Date and Certificate Number

### **Physical Description:**

**PARENT 1**

**PARENT 2**

Height & Weight: \_\_\_\_\_

Eye and Hair Color: \_\_\_\_\_

Complexion: \_\_\_\_\_

Health Status:

PARENT 1	PARENT 2

List health, hospitalization and life insurance plans:

PARENT 1	PARENT 2
Type & Amount:	
Company:	
Yearly Premium:	
Type & Amount:	
Yearly Premium:	

Educational Background:

PARENT 1	PARENT 2
Highest Grade Completed:	
School/College:	
Location:	
Diploma\Degree\Date:	
Additional Education:	

Previous Marriage (If Applicable):

PARENT 1	PARENT 2
Date\Place:	
How Terminated:	
Where/When:	
Date\Place:	
How Terminated:	
Where/When:	

List hobbies, special interest and community activities:


List all persons living in your home. Do not include yourselves or children, but do include relatives, boarders and employees:

Name	Age	Relationship

List all children living in your home:

Name	Birth/Adopted	Birth date	Occupation or School & Grade

List all children who do NOT live in the home:

Child's Name	Birth/Adopted	Birthdate	Occupation or School & Grade

PARENT 1's PARENTS:

Father's Name & Address

Mother's Name & Address

PARENT 2's PARENTS:

Father's Name & Address

Mother's Name & Address

Employment Information:

PARENT 1  
Current Employment

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Title/Position: \_\_\_\_\_  
Date of Employment: \_\_\_\_\_  
Annual Salary: \_\_\_\_\_  
Benefits: \_\_\_\_\_

PARENT 2  
Current Employment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Please list work history for the past 10 years):

PARENT 1  
Previous Employment  
Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
Type of Work: \_\_\_\_\_  
Date of Employment: \_\_\_\_\_  
Begin/End Salary: \_\_\_\_\_

Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
Type of Work: \_\_\_\_\_  
Date of Employment: \_\_\_\_\_  
Begin/End Salary: \_\_\_\_\_

Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
Type of Work: \_\_\_\_\_  
Date of Employment: \_\_\_\_\_  
Begin/End Salary: \_\_\_\_\_

PARENT 2  
Previous Employment:  
Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name/Address of Employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Real Estate – Personal Property Business:**

If you own your home, what is its present value? \_\_\_\_\_

What is the outstanding mortgage? \_\_\_\_\_

List your monthly mortgage payment or rent? \_\_\_\_\_

Are your sanitary and water supply systems part of a municipal or private system? \_\_\_\_\_

What is the amount currently in your checking accounts? \_\_\_\_\_ savings? \_\_\_\_\_

What stocks/bonds do you own and their value? \_\_\_\_\_

List the amount and source of any other income. \_\_\_\_\_

List any other property and/or investments. \_\_\_\_\_

List your outstanding loans, debts, and payment plans. \_\_\_\_\_

**List all vehicles or pleasure crafts that you own or are buying, the balance due and the amount of monthly payment:**

<u>Vehicle</u>	<u>Balance Due</u>	<u>Monthly Payment</u>

What is the annual insurance premium(s) on these vehicles/crafts? \_\_\_\_\_

Have you ever been legally arrested or convicted of a crime? \_\_\_\_\_ If yes, Year/State \_\_\_\_\_

**Explanation**

Has child abuse/neglect/domestic violence allegations been filed against you or any family member? \_\_\_\_\_

If yes, year and State \_\_\_\_\_

**References:** Give the name of five persons living in this area, not related to you, who know you very well.

**Name; Complete Address Including City/State/Zip; Day and Evening Phone Numbers with Area Code**

1.

2.

3.

4.

5.

Date

Parent 1's Signature

Date

Parent 2's Signature

Check Type of Adoption Requested:

International

Independent/Agency Assisted (Domestic)

Private/Parental Placement (Domestic)

## POLICIES

*Lutheran Social Services of the National Capital Area, Inc., is a private, non-profit agency whose child placement program was established in 1956. The agency is licensed to provide child placing services in the District of Columbia, Maryland and Virginia*

*The purpose of Lutheran Social Services is "to provide professional social services that promote the well being of individuals, families and the community, to assist congregations in identifying and responding to community needs; to advocate for social justice, individual self-sufficiency and the inherent worth of each human being." We believe in the inherent dignity of the individual, the right to self-determination and the security of the family unit. Our policies are geared towards the client's needs. Services are offered in a non-discriminatory manner regardless of race, creed, religion, national origin, sex or handicapping conditions.*

*Lutheran Social Services provides services to all children available for adoptive placement. These may include children: of all racial and ethnic backgrounds; of all ages; with special needs or handicapping conditions. The children are domestic or foreign born.*

*Lutheran Social Services primarily serves prospective adoptive families within a fifty mile radius of the District of Columbia. Eligibility criteria in relation to age, marital status, sex, income or handicapping conditions may vary according to the needs of a specific child, or child placement source. All home studies will be conducted according to jurisdictional regulations in a professional and timely manner. Placement decisions for LSS domestic adoptions are geared towards the best interest of the child and are made by the staff with input from birth parents. Therefore, we cannot ensure an adoptive placement for every applicant.*

*We affirm the principle of confidentiality in all client relations. Exceptions include release of information mandated by local, state or federal law or authorized by the affected individual. Home studies will be released upon your request to other licensed child placing agencies, Interstate offices, U.S. Immigration Offices or Courts holding jurisdiction over an adoption, or other placement sources, as applicable.*

*Fees for Lutheran Social Services domestic adoptions are based upon a sliding scale related to gross family income and range between \$2,500 and \$7,500. Fees for independent or international adoption are \$200 for application and \$1,150 for a home study. There may be additional fees from the child placement source. Fees for home study reevaluation/updates range from \$300 - \$900. Fees for post placement services range from \$750 - \$825 for three visits in six months, and \$250 for court reports. Fees paid to the agency are to cover the costs incurred by the agency in relation to the adoption program. Decisions about child placement are not related to individual fees paid and no contributions will be accepted or solicited from adoptive applicants or waiting approved families. Post adoption services are provided throughout the lifetime of an adopted child. If Lutheran Social Services cannot provide the service requested, every effort will be made to identify appropriate resource referrals.*

*If for any reason the adoption home study/services cannot be completed, payments already received will be refunded proportionate to the amount of service already rendered by the agency*



**SERVICE CONTRACT - INTERSTATE/INTERNATIONAL ADOPTION APPLICATION**

We/I, the undersigned applicant(s), having completed an adoption application to be filed with Lutheran Social Services of the National Capital Area, Inc., in order to obtain an adoption home study as a necessary pre-adoption requirement, acknowledge an obligation of a home study/home study update fee to be paid as follows:

1. A \$230 (two hundred dollars) registration fee to accompany this application to be paid by us/me to Lutheran Social Services of the National Capital Area, Inc.,
2. The balance of \$1,300 payable at the time of our/my first interview.

If for any reason the adoption home study cannot be completed, the payment already received will be refunded proportionate to the amount of service already rendered by the Agency.

We/I further agree and state that all data provided by us/me as part of our/my Adoption Home application is true and completed to the best of our/my knowledge under penalty or perjury. I/We understand that if we provide the agency with inaccurate or incomplete information that it could lead to denial of our application for home study. Moreover, we/I enter into the fee agreement as stated herein willingly, and under no duress.

If we/I choose to utilize post placement services through Lutheran Social Services of the National Capital Area, Inc., we/I will be obligated for a fee of \$325.00 per visit for three visits in six months, to be paid on the time of each visit. Fees will be charged for any other additional services. Fees subject to change without notice.

We/I further state that we have received the Agency Policy Statement.

**SIGNATURES**

\_\_\_\_\_  
Applicant #1

\_\_\_\_\_  
Witness (To all signatures)

\_\_\_\_\_  
Applicant #2

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission expires \_\_\_\_\_.