PROBATE COURT OF TRUMBULL COUNTY, OHIO
JAMES A. FREDERICKA, JUDGE

IN THE MATTER OF THE ADOPTION _____
(Name after adoption)

CASE NO. _____

PETITION FOR ADOPTION OF ADULT
[R.C. 3107.02]

The undersigned respectfully petitions the court for permission to adopt _____

an adult and to have the adult's name changed to _____.

The Petitioner may adopt the adult because the adult:

- ☐ is totally and permanently disabled.
- ☐ is determined to be a person with an intellectual disability
- ☐ had established a child-foster caregiver, kinship caregiver, or child-stepparent relationship with the petitioner as a minor.
- ☐ was, at the time of the adult's eighteenth birthday, in the permanent custody of or in a planned permanent living arrangement with a public children services agency or a private child placing agency.
- ☐ is the child of the spouse of the petitioner.

_____	_____
Attorney for Petitioner	Petitioner
_____	_____
Typed or Printed Name	Typed or Printed Name
_____	_____
Address	Address
_____	_____
City State Zip Code	City State Zip Code
_____	_____
Phone Number (include area code)	Phone Number (include area code)

Attorney Registration No. _____

ENTRY

This cause is set for hearing on the _____ day of _____, 20____ at _____ o'clock ___.m.

_____
JAMES A. FREDERICKA, PROBATE JUDGE

INFORMATION PROVIDED ON THIS FORM IS TO BE USED TO ESTABLISH A NEW CERTIFICATE OF BIRTH FOR THE ADOPTED CHILD.

Ohio Department of Health
VITAL STATISTICS

CERTIFICATE OF ADOPTION

State Use Only
Original SFN_____
Amended SFN_____
Envelope #_____
AFS #_____

CHILD'S PERSONAL DATA

1. Name of Child **BEFORE** Adoption	2. Date of Birth (Month, Day, Year)	3. Sex	4.Place of Birth (City, County, State or Foreign Country)

Child's Name After Adoption

First Name	Middle Name	Last Name

ADOPTIVE PARENT(S)' PERSONAL DATA

The following information provided below will be used to create the new birth record. List information as it existed on child's date of birth.

Choose One: ☐ Mother ☐ Father ☐ Parent	Gender: ☐ Female ☐ Male	Choose One: ☐ Mother ☐ Father ☐ Parent	Gender: ☐ Female ☐ Male
Current First Name		Current First Name	
Current Middle Name		Current Middle Name	
Current Last Name		Current Last Name	
Last Name Prior to First Marriage		Last Name Prior to First Marriage	
Date of Birth (Month, Day, Year)	Birth Place (State or Foreign Country)	Date of Birth (Month, Day, Year)	Birth Place (State or Foreign Country)

Parent(s) Residence at Time of Child's Birth (Number and Street)

City	County	State	Zip Code	Inside City Limits (Yes or No)

Other Required Information (From the Original Birth Certificate)	**Foreign Adoptions Only (from the Original Birth Certificate)**
Attendant's Name (M.D, D.O, C.N.M, Other Midwife)	Time of BIrth
Mailing Address (Number, Street, City, County, State, Zip Code)	Hospital/Birthing Facility
Registrar's Name	Registrar's Name & Date Filed by Registrar (Month, Day, Year)
Date Filed by Registrar (Month, Day, Year)	Attendant's Name (M.D, D.O, C.N.M, Other Midwife) & Date Signed

Parent(s) Current Mailing Address	Street	City or Village	State	Zip Code
Attorney's Name and Address	Street	City or Village	State	Zip Code

CERTIFICATION

Probate Court, _____ County, Ohio

I hereby certify that the child named above was adopted on _____ (Date)

by _____ (Name(s) of Petitioner(s))

as set forth in the final decree of adoption, Case No., _____

Date _____ Probate Judge _____

Deputy Clerk _____

PROBATE COURT OF TRUMBULL COUNTY, OHIO
JAMES A. FREDERICKA, JUDGE

STATEMENT OF ADOPTED PERSON

CASE NO. _____

CHILD'S NAME AFTER ADOPTION _____

THE CHILD NAMED IN THIS ADOPTION IS:

☐ A minor who became available or potentially available for adoption on or before September 18, 1996 and at least one of the biological parents consented to the adoption or a probate court entered a finding that the biological parent(s) signature was not needed (O.R.C. 3107.39).

☐ A minor who became available for adoption after September 18, 1996 (O.R.C. 3107.45).

EXCLUSIONS FOR ODHS 1693 DISCLOSURE

☐ Foreign adoption finalized in another country and re-finalized in Ohio.

☐ Foreign adoption finalized in Ohio only.

☐ Step-parent adoption.

☐ Involuntary surrender/ court commitment.

☐ Other (please specify) _____

_____

PROBATE COURT OF TRUMBULL COUNTY, OHIO
JAMES A. FREDERICKA, JUDGE

IN THE MATTER OF THE ADOPTION OF _____
(Name after adoption)

CASE NO. _____

CONSENT TO ADOPTION

[R.C. 3107.06, 3107.08 & 3107.081]

The undersigned _____

[check one of the following seven capacities by which your consent is given]

- ☐ Mother
- ☐ Father
- ☐ Putative father who has registered under R.C. 3107.062 (for a minor born on or after January 1, 1997)
- ☐ Putative father (for a minor born before January 1, 1997)
  Agency having permanent custody
- ☐ Minor, who is more than twelve years of age (this consent must be executed in the presence of the Court)
- ☐ Other _____

hereby waives notice of the hearing on the Petition For Adoption to be filed in the court, and consents to the adoption of _____
(Name before adoption)
as proposed in the petition.

The undersigned further states that this consent is voluntarily executed irrespective of disclosure of the name or other identification of the prospective adopting parents.

_____

Sworn to before me and signed in my presence this _____ day of _____, 20____

_____
Person authorized pursuant to R.C. Chapter 3107
to take this acknowledgement

_____
Title

PROBATE COURT OF TRUMBULL COUNTY, OHIO
JAMES A. FREDERICKA, JUDGE

IN THE MATTER OF THE ADOPTION OF _____
(Name after adoption)

CASE NO. _____

PETITIONER'S ACCOUNT
(R.C. 3107.055)

☐ **PRELIMINARY ESTIMATE ACCOUNTING**
(To be filed not later than date petition filed)

☐ **FINAL ACCOUNTING**
(To be filed not later than 10 days prior to date of final hearing)

This accounting specifies all disbursements of anything of value the petitioner, a person on the petitioner's behalf, and the agency or attorney made and has agreed to make in connection with the minor's permanent surrender under division (B) of Section 5103.15 of the Revised Code, placement under Section 5103.16 of the Revised Code, and adoption under Chapter 3107. (Attach extra sheets if necessary)

DATE	NAME AND ADDRESS	DISBURSEMENTS MADE OR AGREED TO BE MADE	ACTUAL COSTS
	PHYSICIAN		
	HOSPITAL/MEDICAL FACILITY		
	ATTORNEY		
	ACTUAL COST TO THE ATTORNEY		
	AGENCY		
	ACTUAL COST TO THE AGENCY		
	MAINTENANCE AND MEDICAL CARE REQUIRED UNDER R.C. 5103.15		
	EXPENSES PURSUANT TO R.C. 3107.055(C)(9)		
	FOSTER CARE		
	GUARDIAN AD LITEM		
	COURT COSTS		
	ALL OTHER DISBURSEMENTS		
TOTAL			

Case No: _____

CERTIFICATION OF PETITIONER'S ACCOUNT

The undersigned certifies this _____ day of _____, 20___, that this accounting is true and accurate.

_____
Attorney or Agency

_____
Typed or Printed Name

_____
Address

_____
City State Zip

_____
Telephone Number (include area code)

The petitioner has reviewed this accounting and attests to its accuracy this _____ day of _____, 20_____.

_____
Petitioner

_____
Petitioner

ORDER APPROVING PETITIONER'S ACCOUNT

The Petitioner's Account filed in accordance with R.C. 3107.10 is hereby approved.

_____
James A. Fredericka, Probate Judge

WEBCHECK INSTRUCTIONS

1. The Trumbull County Sheriff's Department shall run a criminal background check, using the WEBCHECK system, on all prospective adoptive parents and on applicants for guardianships, estates, name changes or trusts as determined by the Court.

2. Upon completion of the attached WEBCHECK form, the applicant shall take it to the Trumbull County Sheriff's Department, located at 150 High Street, 330-675-2540. WEBCHECKS are conducted Monday - Friday from 9:00 am to 3:00 pm.

3. The fee to conduct a WEBCHECK is $25.00 for BCI checks (the entire state of Ohio), the fee shall be paid by the applicant to the Sheriff's Department at the time of the check. The fee is payable in **cash** or **money order** only. **If the applicant has not lived in the state of Ohio for the past five years, a federal check shall be administered. The cost to conduct a federal check is an additional $30.00 for a combined fee of $55.00.**

4. In addition to the money and WEBCHECK form, the applicant must also bring their driver's license.

5. As the applicant, it is very important to have the WEBCHECK administered, since a hearing will not be held until the results of the WEBCHECK have been received by the Probate Court.

IN THE COURT OF COMMON PLEAS
PROBATE DIVISION
TRUMBULL COUNTY, OHIO

IN THE MATTER OF:	)	CASE NO.
THE ADOPTION OF	)	
	)	

CONSENT TO WEBCHECK CRIMINAL BACKGROUND CHECK (ADOPTION)

I, the undersigned, hereby authorize the Trumbull County Sheriff's Department to perform a criminal background check using the WEBCHECK system, to have the results sent directly to the Trumbull County Probate Court to become a permanent part of the Court's file, and to have the results sent by the Trumbull County Probate Court to the adoption assessor appointed by the Court.

_____
Signature Date

_____
Printed Name

_____
Address

_____

_____
Telephone Number Date of Birth

IN THE COURT OF COMMON PLEAS
PROBATE DIVISION
TRUMBULL COUNTY, OHIO

IN THE MATTER OF:	)	CASE NO.
THE ADOPTION OF	)	
	)	

CONSENT TO WEBCHECK CRIMINAL BACKGROUND CHECK (ADOPTION)

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_____
Signature Date

_____
Printed Name

_____
Address

_____

_____
Telephone Number Date of Birth