

If you need additional space for an answer, you may use the back of a page. The completed questionnaire will be kept confidential and will remain in our possession. Please Print.

Date: _____

Referred by: _____

ADOPTION/GUARDIANSHIP

YOUR CURRENT PERSONAL INFORMATION

1. Full Name (spouse too) _____
2. Street Address _____
City _____ County _____ State _____ Zip _____
3. **ADDRESS FOR MAIL IF DIFFERENT THAN HOME ADDRESS** _____

4. Home Phone _____ Business Phone _____
E-mail _____ Cellular Phone _____
5. Social Security Number Wife: _____ Husband: _____
Biological father: _____
6. Date of Birth: Wife _____ Age _____ Husband _____ Age _____
Biological father: _____
7. Length of Residence in Minnesota/North Dakota _____
8. Are you presently in the Military Service? _____
9. Previous Attorney _____
10. Date of marriage: _____ City/State/County of marriage _____

NATURAL/BIOLOGICAL PARENTS' PERSONAL INFORMATION

11. Full Name(mom and dad) _____
12. Street Address _____
City _____ County _____ State _____ Zip _____
13. **ADDRESS FOR MAIL IF DIFFERENT THAN HOME ADDRESS** _____

14. Home Phone _____ Business Phone _____
Pager _____ Cellular Phone _____
15. Date of marriage: _____ City/State/County of marriage _____
Date of Separation: _____
16. Social Security Number Mom: _____ Dad: _____

Biological father: _____

17. Length of Residence in Minnesota/North Dakota _____

18. Are you presently in the Military Service? _____

19. Previous Attorney _____

20. Will natural parents consent to adoption/guardianship? Mom: _____ Dad: _____

21. The child's new name when adoption is approved: _____

22. How long with the guardianship last? _____

23. List **ALL** accounts the child has. (the court needs to be noticed of any access to any kinds of funds or money, property, etc this child has):

CHILDREN RELATIVE TO THIS PROCEEDING:

Do not list children from previous marriages or other relationships

1. Child:

Full Name _____

Age _____ Birthdate- _____ Social Security # _____

2. Child:

Full Name _____

Age _____ Birthdate- _____ Social Security # _____

3. Time frame of where the children lived since birth and with whom: _____

