

<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>PETITION FOR                  DIRECT PLACEMENT ADOPTION</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_, adoptee  
Full name of child

**The petitioners are:**

Name	Relationship to Adoptee	Address, City, State, Zip	Date and Place of Birth
<input type="checkbox"/> Adopting parent Maiden: _____			
<input type="checkbox"/> Adopting parent Maiden: _____			

**Each adopting petitioner states:**

1. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.
2. The adoptee was born on \_\_\_\_\_ at \_\_\_\_\_.  
Birth date and time City, county, and state of birth  parent/guardian.
3. The adoptee was temporarily placed in my home on \_\_\_\_\_ by a  child-placing agency.  
Date
4. The adoptee will be my heir at law.  not be changed.
5. The adoptee's name will  be changed to \_\_\_\_\_.  
First Middle Last
6. The adoptee's property is \_\_\_\_\_.
7. The parties have elected not to exchange identifying information. Verified statement of identifying information (form PCA 340) attached.

**Note:** Do **not** complete items 8 and 9 if item 7 is checked.

8. The adoptee is \_\_\_\_\_  
Full name of child (type or print)

\_\_\_\_\_  
Present residential address (if known)

**The adoptee's parents are:**

Father's name (type or print) _____	Birth date _____	Mother's name and maiden name (type or print) _____	Birth date _____
Address _____		Address _____	
City, state, zip _____		City, state, zip _____	

9. The adoptee's court-appointed guardian and/or conservator is/are \_\_\_\_\_  
Name(s) and address(es)

\_\_\_\_\_

(See additional pages)

Do not write below this line - For court use only

- 10. I have received a copy of the reasonably obtainable nonidentifying information required for a placement of the child for adoption. A copy is attached.
- 11. I have been informed of the availability of counseling services. I  have  have not received counseling.
- 12. No preplacement assessments have been completed on us other than those attached.
  - Preplacement assessments have been started but not completed as follows:

\_\_\_\_\_

13. I am married but my spouse is not joining me in this petition because (Attach separate sheet as needed.)

14. The adoptee is an Indian child as defined in MCR 3.002(12). The identity of the tribe is

\_\_\_\_\_  
Name of tribe, if known

The appropriate consents have been executed pursuant to MCL 712B.13 and the Michigan Adoption Code.

**I REQUEST:**

- 15. Termination of all existing parental rights inconsistent with the order of adoption, entry of an order approving placement of the child with me, and entry of an order of adoption with the adoptee's name recorded as stated in item 5.
- 16. The adoption be completed immediately because

17. The court to waive the required investigation because the adoptee has been placed in foster care with me for at least 12 months and a foster family study was completed or updated within the last 12 months.

I declare that the statements above are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
/s/  
Attorney signature

\_\_\_\_\_  
Attorney name (type or print) Bar no.

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
Date

\_\_\_\_\_  
/s/  
Signature of petitioner

\_\_\_\_\_  
/s/  
Signature of petitioner

\_\_\_\_\_  
Petitioner telephone no.

**Agency Contact Information:**

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

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

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

\_\_\_\_\_  
Address

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

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

**IT IS ORDERED:**

- 18. The preplacement assessment filed with the petition has been reviewed by the court and
  - a. it is a sufficient investigation of the adoptive home, and no further investigation is required.
  - b. \_\_\_\_\_  
Court agent or employee, child-placing agency  
is directed to conduct an additional investigation and report its findings in writing to this court, within 3 months of this order, in accordance with the provisions of section 46 of the Michigan Adoption Code.
- 19. The full investigation is waived. The petitioner(s) shall file a copy of the most recent foster family study as updated and supplemented.
- 20. The petitioner(s) shall give notice of this petition to the persons prescribed in MCR 3.800(B) in accordance with MCR 3.802(A)(3) (use form PCA 352).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Bar no.