



Adoption Information Request Form

INDIVIDUAL REQUESTING INFORMATION

I am the: ☐ Birth parent ☐ Adoptee ☐ Adoptive parent

First Name Middle Name Last Name Maiden

Street Address County

City State Zip

Home Phone # Cell Phone #

Email Address:

ADOPTEE'S INFORMATION Please complete as much information as possible.

First Name Middle Name Last Name Other Names (if known)

Date of Birth: Gender: ☐ Male ☐ Female

County/State court that finalized the adoption:

Adoptive Parent's Names:

Birth Parent's Names:

ADDITIONAL INFORMATION:

TYPE OF INFORMATION REQUESTED

If you are the birth parent, your option is:

☐ **Correspondence**

Your file will be checked for any letters, cards, pictures, or updates from the adoptive family and/or adoptee. Fee: Complimentary

You are also encouraged to write a letter to the child you placed, and we can save it in their file and possibly contact the adoptive family in order to share it.

If you are the adult adoptee or the adoptive parent of a minor adoptee, your options are:

☐ **Correspondence**

Your file will be checked for any letters, cards, pictures, or updates from the birth family.

Fee: Complimentary

You are also encouraged to write a letter to your birthparent to be kept in their file in the event they reach out.

☐ **Non-identifying Search**

A non-identifying search may include information regarding the birth parent's physical description, nationality, religious background, medical history and/or correspondence in your file. We will review your file more thoroughly, redact identifying information, and send appropriate info to you.

Fee: \$175.00 - Submit with form

Identifying Search (Identifying searches may only be requested by adult adoptees.)

Catholic Charities does not facilitate identifying searches and instead partners with Laura Long of Adoption Search Services to conduct identifying searches. The court that finalized the adoption will authorize her to locate the biological parent(s) or adult sibling(s) to inform them of the request and to let them know that they have the right to release identifying information (non-identifying information is also provided), maintain confidentiality, or perhaps update medical history information. You may contact her directly at 816-540-3610 <https://theadoptionsearchconnection.com>, Fee: Arranged and paid directly to Adoption Search Services. You may also:

1. **Request your original birth certificate** from the Bureau of Vital Records
<https://health.mo.gov/data/vitalrecords/forms/>
Go to the above link, then click on "Missouri Adoptee Rights Act (MARA). From here you will choose what you are wanting.
2. **Contact the court that finalized your adoption** and request an identifying search be conducted. Some courts use a confidential intermediary in this process because of the length process to track down birthparents when their file has not been updated with current addresses, phone numbers, etc. Most, but not all, adoptions facilitated by Catholic Charities have been done through Jackson County. Visit their webpage for forms and more information:
<https://www.16thcircuit.org/adoption-record-disclosure>

If you are the adoptive parent of an adult adoptee, your options are:

☐ **Correspondence**

Your file will be checked for any letters, cards, pictures, or updates from the birth family.

Fee: Complimentary

☐ **Home Study**

You may obtain a copy of your original home study, including any home study updates associated with the adoption. Fee: \$50.00

NOTARIZED SIGNATURE

I am interested in obtaining information from my adoption record at Catholic Charities of Kansas City-St. Joseph, Inc. I am aware of the Missouri law pertaining to adoption records (Section 453.121 RSMO) and understand that Catholic Charities will only release approved information to individuals in accordance with Missouri law for adoptions handled by our agency. If requesting an identifying search, I agree to release this form to the Adoption Searcher who partners with Catholic Charities and will work independently with the Adoption Searcher, including paying for the identifying search.

Signature of Applicant

Date

STATE OF _____)

COUNTY OF _____)

On this _____ day of _____, 20____, before me, the undersigned Notary Public, personally appeared.

_____ known to me to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purpose therein contained.

In witness whereof, I have hereunto set my hand and official seal.

Notary Public

My commission expires:

SUBMITTING REQUEST

Mail completed, notarized form and full payment (if applicable) to:
Serve & Lift KC Catholic Charities KCSJ
Attn: Children and Family Services
8001 Longview Road
Kansas City, Missouri 64134

If you have questions, please contact the adoption coordinator at 816-310-7051. Please note the typical response time for correspondence checks and non-identifying searches is approximately 3-4 weeks, excluding holidays. The response time for identifying searches is significantly longer; an approximate estimate would be provided by Adoption Search Services.