

World Child Application

Please print out and follow directions below for completing this form.

Name of Applicant(s) Mr. _____

(Full, legal names) Ms. _____

Address: _____
Home Work (Mr.) Work (Ms.)

Telephone Numbers _____

Fax Numbers _____

Email Address _____

PERSONAL INFORMATION

	Male Applicant	Female Applicant
Age/Date of Birth		
Religious Preference		
Education		
Occupation		
Approximate Income		
Approximate Savings		
Physical Description (height, weight)		
Limiting physical treatment (describe circumstances and give dates)		
Mental Health Treatment (give applicable dates and circumstances)		
Record of arrest(s) / conviction(s) (if yes, please explain)		
Date of Marriage		
Number of previous marriages		
Biological children, if any (number, age, sex, origin)		
Adopted children, if any (number, age, sex, origin)		
Passport number/expiration date		
Social Security Number		
<i>Country or Ethnicity</i> of Child Desired		
Citizenship		

Request for: _____ Homestudy _____ Foreign Placement _____ Both

World Child International - Initial Application for Child Placement: Foreign Child Adoption Questionnaire

Please describe the child or children you wish to adopt. Include age range, race, health or handicap, number of siblings, and whether or not you accept either sex:

Please identify how you first heard of World Child International. (i.e. personal referral, newspaper ad, etc.)

Study Process; Documentation; Travel

1) Do you have an approved home study by a licensed child-placement agency?

Yes _____ No _____ Anticipated Date: _____

If yes, give name of agency, social worker, address, telephone number, approval date:

If no, please have your social worker contact World Child International for a *home study outline*. Explain your specific plan, if known, and time frame for receiving a home study, giving name of anticipated agency.

2) **INS Status** - Have you opened an I-600A file with your local U.S. Immigration and Naturalization Service office?

Yes _____ No _____

If yes, in what city? _____ Date filed _____

3) Do you at present have an active application with any other adoption agency where there is a possibility of the placement of a child with you?

Yes _____ No _____

4) Most countries require the parents to travel to adopt their child. This trip may last from three days to six weeks, depending upon the laws of the country. Please indicate any travel constraints:

In order to process this application, we ask that you include a **non-refundable** check payable to World Child International. for the amount of \$225.00 along with a photo(s) of each family member living in the household. The *receipt of this application does not place you on a waiting list: receipt of the homestudy is when services begin*. Also, applicants need to be willing to adopt a child from more than one country.

I/We, the undersigned, hereby confirm under the penalties of perjury that all of the information contained herein is current, complete and accurate, upon our personal knowledge.

Applicants signature _____ Date _____

Applicants signature _____ Date _____

Return to:
World Child International, 9300 Columbia Blvd., Silver Spring, Maryland 20910