

## QUESTIONNAIRE FOR RELATIVE ADOPTIVE APPLICANTS

1. Name of child/children to be adopted: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Birth Status: Legitimate     Illegitimate     Full Orphan     Half Orphan   
(both birth parents deceased)    (one of birth parents deceased)
4. Name of Birth Parents: Father: \_\_\_\_\_  
Mother: \_\_\_\_\_
5. Address of Birth Parents: \_\_\_\_\_  
\_\_\_\_\_
6. Occupation of Birth Parents: \_\_\_\_\_
7. Income of Birth Parents: \_\_\_\_\_
8. Siblings of the child(ren) to be adopted (please state their names, gender, age and attitude towards their sister/brother's adoption):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Does/do the child(ren) live with parents? Yes     No
10. Does/do the child(ren) live with persons other than their parents? Yes     No
11. Does/do the child(ren) live with others (custodian/guardian)? Yes     No
12. Please specify name and relationship of the child(ren) to the custodian/guardian.  
\_\_\_\_\_  
\_\_\_\_\_
13. Address of child(ren) (Give the most complete address and if possible, contact number: telephone, cell phone, E-mail, fax, etc.):  
\_\_\_\_\_  
\_\_\_\_\_

14. Is/are the parent(s) of the child(ren) in touch (visit, write, phone) with the prospective adoptee(s)? Yes  No

15. Full Name of Applicants:

Male: \_\_\_\_\_

Female: \_\_\_\_\_

16. Birthdate: Male: \_\_\_\_\_ Female: \_\_\_\_\_

17. Ethnic Origin: Male: \_\_\_\_\_ Female: \_\_\_\_\_

18. Place of Birth: Male: \_\_\_\_\_ Female: \_\_\_\_\_

19. Civil Status: Male: \_\_\_\_\_ Female: \_\_\_\_\_

20. Current Citizenship: Male: \_\_\_\_\_ Female: \_\_\_\_\_

21. Name of Employer, Position, Length of Employment of the Applicants:

Male: \_\_\_\_\_

Female: \_\_\_\_\_

22. Annual Income: Male: \_\_\_\_\_ Female: \_\_\_\_\_

23. Number of child(ren) of prospective adoptive parents (indicate if living with them, their ages and civil status):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

24. Attitude of applicant's biological/adopted child(ren) towards the adoption plan:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**25. Other individuals who reside in the household (names, birth date, relationship to applicants, attitude towards the adoption plan, permanently or temporarily residing with applicants, contributions, if any, to the family income):**

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**26. Reason(s)/Motivation(s) for Adoption:** \_\_\_\_\_

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**27. Applicant's relationship to identified child(ren) to be adopted:**

**a. Please describe how you are exactly related to the child(ren)(please provide a genogram/family tree tracing your common ancestry with the prospective adoptee):**

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**b. Kindly provide us with a certified true copy of the birth certificate of applicant who is supposedly related to the child to be adopted.**

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**28. Reason for the prospective adoptive parents' choice of this/these particular child(ren) as their adoptee(s):** \_\_\_\_\_

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**29. Attitude of prospective adoptive child(ren) towards his/her/their being adopted. (If applicable, depending on age and level of maturity of prospective adoptive child(ren):**

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**30. Description of the degree of bonding between the prospective adoptive parents and the prospective adoptive child(ren) (to include, among others, ways and means of nurturing the relationship, visits, who visited, when, duration of stay, what they did together with the prospective adoptive child/children):** \_\_\_\_\_

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**31. Description of Living Accommodations (house or apartment; rented or owned) of applicants:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_  
(Male Applicant)

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_  
(Female Applicant)