

PROBATE COURT OF RICHLAND COUNTY, OHIO

PLACEMENT OF \_\_\_\_\_  
(Name before placement)

CASE NO. \_\_\_\_\_

APPLICATION FOR PLACEMENT FOR ADOPTION

R.C. 5103.16 (D)

[Check all boxes which apply]

Now come(s) \_\_\_\_\_ and \_\_\_\_\_ and say(s):

Applicant(s) is/are

- mother and father of child to be placed for adoption and we are \_\_\_\_\_ and \_\_\_\_\_ years of age, respectively.
- mother and sole parent of child to be placed for adoption and mother is \_\_\_\_\_ years of age.
- father and sole parent of child to be placed for adoption and father is \_\_\_\_\_ years of age.

The marital status of

- the mother is \_\_\_\_\_ and if divorced, the date, court name and case number is \_\_\_\_\_ and if married, the date of the marriage is \_\_\_\_\_ and name of her spouse is \_\_\_\_\_.

The child to be placed for adoption

- was born on \_\_\_\_\_.
- is not yet born at the time of application and the anticipated date of delivery is \_\_\_\_\_.

The Identity of the prospective adoptive parent(s) is/are

- known by birth parent(s)
- unknown by birth parent(s)
- requested not to be revealed to the birth parents.

- Birth parent(s) have been informed that the birth parent(s) and prospective adoptive parent(s) may enter into a nonbinding open adoption in accordance with Section 3107.63 of the Revised Cod.
- Applicant(s) have or will place the child in the temporary custody of the prospective adoptive parent(s), one or both of whom are related by blood or marriage to one or both applicants.
- Applicant(s) request that the Court place the child in the temporary custody of the prospective adoptive parent(s) who are nonrelated to applicant(s).

An affidavit (RCPC Form A-2) regarding biological father

- is attached
- is unnecessary as biological father has consented to the placement.
- Attached hereto is a certified copy of the birth certificate or statement why it is not available.

- [ ] 18.3 Consents to the adoption of birth parents with Ohio Law and Adoption Materials Form ODHS 1693 and RCPC Form A-3 Withdrawal of Consent and Finality of Adoption Decree will be filed prior to hearing on proposed placement if the child is under six months of age; otherwise birth parents will execute such consents and forms in open court.
- [ ] A social and medical history of the applicant(s) (ODHS Form 1616) is attached and made part of this application.
- [ ] Your applicant(s) further state(s) that the child may be examined by a physician selected by the prospective adoptive parents.
- [ ] Your applicant(s) further state(s) that if the child's hospital discharge, subject however, to the approval of the circumcision by the prospective adoptive parents.

Wherefore, applicant(s) state that it would be in the best interest of the child if such placement is approved by the Court; that the right to examine any investigation report on the proposed adoptive parents is waived; and request that the Court approve the proposed placement and that this application be set for hearing at the earliest date allowable by law.

\_\_\_\_\_  
Applicant - Birth Mother

\_\_\_\_\_  
Co-Applicant - Birth Father

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Phone Number (include area code)

CERTIFICATION BY ATTORNEY

I certify that I represent only the applicants and do not represent the prospective adoptive parents.

\_\_\_\_\_  
Attorney for Applicant(s)

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Attorney Registration Number