STEP PARENT ADOPTIONS

PURSUANT TO LUCAS CO. LOCAL RULE 57.1 (F)

EVERY FILING SHALL BE TYPEWRITTEN OR COMPUTER GENERATED. THE COURT MAY REFUSE ALL FILINGS NOT SO PREPARED OR CERTIFIED. NO PLEADINGS SHALL BE FILED SIGNED IN PENCIL.

I. PETITION FOR ADOPTION

- A. Attorney provides:
 - * Petition for Adoption (Form 18.0) signed by adopting parent only, using full legal names, **no initials** and pays court costs.
 - * Spouse signs consent. (Form 18.3)
 - * ODH Vital Statistics, Certificate of Adoption (Form HEA 2757) with original or certified copy of child's existing birth certificate.
 - * Request For Info RE: Paternity Establishment Form completed by Central Paternity Registry dated 15 or more days after the minor's birth. E-Mailed information must be legible or a certification from the attorney will be required. Corresponding document required.
 - * Need Consent (Form 18.3) by legal father or Putative Father Registry Certification OR notification of hearing (Form 18.2) will be done by court.
 - * If legal father, we need copy of paperwork.
 - * Record Check- Stepparent has fingerprints done for a criminal background check. A list of locations will be provided by your social worker.
- B. Home study is ordered by the Court and must be approved before any hearings.
- C. Final Hearing is set if we have consent by parents or consent by a parent and Putative Father Registry Certification
- D. Hearing on Petition will be set if non-consenting parent needs to be notified.
 - * Notification is by personal service, arranged by the Court, or publication if address is unknown.
 - * If publication is necessary, Attorney to provide Affidavit and Request for Service by Publication
 - * Certified mail may be used if non-consenting parent is incarcerated.

II. HEARING ON PETITION (petitioners come without children)

- A. If non-consenting parent does not appear:
 - * Evidence taken regarding history of payment and support.
 - * Judge signs JE/Consent Not Required (Form 18.4) and JE/Best Interest (Form 20.14-A). Final Hearing is scheduled.
- B. If non-consenting parent files a written objection within 14 days after service:
 - * Contested Consent Hearing is scheduled for half or whole day testimony.
 - * If consent is found necessary, petition is dismissed.
 - * If consent is found unnecessary, Best Interest Hearing is scheduled.
 - * If Best Interest to be adopted is confirmed, Final Hearing is scheduled.
 - * If Best Interest to be adopted is denied, Petition is dismissed.

III. FINAL HEARING

- A. Petitioners and child must appear.
- B. Court provides:
 - * Notice of Final Hearing (Form 20.11A)
 - * Adoption Certificate for Parents (Form 18.8)
 - * Final Decree. (Form 18.7)
- C. Court forwards documents to State BVS for new birth certificate and notifies child support, if applicable
- D. Petitioner to wait at least 30 days after the final hearing to order the new birth certificate, following the instructions provided in the packet at the final hearing.

PROBATE COURT OF LUCAS COUNTY, OHIO JACK R. PUFFENBERGER, JUDGE

CASE NO.	(Name after adoption)
	ETITION FOR ADOPTION OF MINOR [R.C. 3107.05]
The undersigned petitions to adopt	
a minor, and to change the name o	of the minor to
The petitioner states the following:	PETITIONER
Full Name:	Age
Full Name:	Age
Place of Residence:	Street Address
	Zip Code Duration of residence
Marital Status:	Date and Place of Marriage:
Relationship of Minor to Petitioner:	
	source suitable to provide for the nurture and care of the minor and it is the desire of the hip of parent and child with the minor.
	MINOR TO BE ADOPTED
Birth Name:	Date of Birth:
Place of Birth:	Property and Value:
The minor is living in the	e home of the petitioner, and was placed therein for adoption on the
day of, 20	0by
The minor is not living in	the home of the petitioner, and resides at
A certified copy of the birth certifica	ate of the minor is filed with this petition or is not available due to the following:
-	(Form 18.9), if required, is filed with this petition. anent custody of
whose address is	
	uring the permanent custody proceedings was
whose address is	

The a	ttorney representing the minor during the per	rmanent custody procee	edings was	
whose	e address is			
	PERSONS OR AGENCIES WH	IOSE CONSENT T	O THE ADOPTION IS REC	UIRED
	Name:	Relationship:	Age, if minor	
	Address:		□ Con	sent filed
	Name:	Relationship:	Age, if minor	
	Address:		Con	sent filed
	-		, the agency has	s permanent
	Custody of the minor filed under,		, □ Con	sent filed
	PERSONS WHOSE CON	SENT TO THE AD	OPTION IS NOT REQUIRE	:D
	No person has timely registered pursuant Department of Jobs and Family Services Fo		a putative father of the minor	. Attached is Ohio
Α	The consent ofName	Address		Relationship
5				Relationship
В	The consent ofName	Address	_	Relationship
period of the	B The parent has failed without justifiable of at least one year immediately preceding petitioner. The parent has failed without justifiable of the parent has failed without justifiable.	the filing of the adoption	on petition or the placement of the for the maintenance and supp	ne minor in the home nort of the minor as
	ed by law or judicial decree for a period of acement of the minor in the home of the petit			e adoption petition or
	☐ State other grounds under R.C. 3107.0	7 (includes putative fath	ner of the minor.	
Attorr	ney for Petitioner	Petitioner		
Typed or Printed Name		Typed or	Printed Name	
Stree	t Address	Petitioner		
City	State Zip	Code Typed or	Printed Name	
Telep	hone Number (include area code)	Street Ad	dress	
E-Ma	il Address	City	State	Zip Code
Attorn	ey Registration No	Telephon	ne Number (include area code)	
		E-Mail A	ddress	

CASE NO

PROBATE COURT OF LUCAS COUNTY, OHIO JACK R. PUFFENBERGER, JUDGE

INFORMATION PROVIDED ON THIS FORM IS TO BE USED TO ESTABLISH A NEW CERTIFICATE OF BIRTH FOR THE ADOPTED CHILD.

Ohio Department of Health VITAL STATISTICS CERTIFICATE OF ADOPTION

	State Use Only	
Original SFN		
Amended SFN		
Envelope #		
AFS #		

	CHILD'S PER	SONAL DATA		
1 Name of Child BEFORE Adoption	2 Date of Birth (Month, I	Day, Year) 3 Sex	4 Place of Birth	(City, County, State or Foreign Country)
	Child's Name	After Adoption		
First Name	Middle Na			Last Name
The following information provide	ADOPTIVE PARENT(S d below will be used to create the	•		existed on child's date of birth.
Choose One	Relation to Child	Choose		Relation to Child
Mother Father Parent	Adoptive Natural	Mother Fati	ner Parent	Adoptive Natural
Current First Name		Current First Name		
Current Middle Name		Current Middle Name		
Current Last Name		Current Last Name		
Last Name Prior to First Marriage		Last Name Prior to First Marriage		
Date of Birth (Month, Day, Year) Bir	th Place (State or Foreign Country)	Date of Birth (Month, Day, Year) Birth Place (State or Foreig		Birth Place (State or Foreign Country)
Parent(s) Residence at Time of Child's Birth	(Number and Street)	<u> </u>		
City County	State	Zip Code	9	Inside City Limits (Yes or No)
				Yes No
Time of Birth	oreign Adoptions Only (Inforn	nation from Original	Birth Record)	
Hospital/Birthing Facility				
Registrar's Name & Date Filed by Registrar	(Month, Day, Year)			
Attendant's Name (M.D, D.O, C.N.M, Other	Midwife) & Date Signed			
	Corti	fication		
Probate Court,		County,	Ohio	
I hereby certify that the child name	ed above was adopted on			(Date)
by				(Name(s) of Petitioner(s))
as set forth in the final decree of a	doption, Case No.,			
Date		Probat	te Judge	
		Deput	y Clerk	

HEA 2757 (10/2020) 5335.06

Ohio Central Paternity Registry P.O. Box 183206 Columbus, OH 43218-3206 PHONE: 888-810-6446

REQUEST FOR INFORMATION RE: PATERNITY ESTABLISHMENT

Instructions:

Additional Notes:

Complete the top portion of the forma and email to: kandacebillingsley@maximus.com. Use a separate form for each child. We require 72 hours from the date of email to return search results. Search results will be based upon the data provided *exactly* as it is on the form.

Utilizing the electronic form filled version of the form is preferred, however, clearly printed copies will be accepted.

Person/Agency requesting informat	ion:		
Contact Phone Number:	Return Em		
CHILD FIRST NAME:	MIDDLE:LAST:		
D.O.B			
MOTHER FIRST NAME:	MIDDLE:	LAST:	
D.O.B			
FATHER FIRST NAME:	MIDDLE:	LAST:	
D.O.B			
CPR SEARCH RESULTS: No paternity records on f	ile		
Paternity establish by Affi Received from:		CPR # Vital Statistics Mail	
Paternity established by A Case Number # Date			
Paternity established by C Case Number # Date		CPR#	