



Birth Mother's Marital History & Father Identification

Print Name: _____

MARITAL HISTORY

Are you currently married? Yes No

If yes, give husband's full name and date and place of marriage

Are you currently living with your husband? Yes No

If not, when did you separate? _____

Have you been married previously? Yes No

If yes list dates and places of marriage(s) and divorce (s) from or death(s) of spouses

If you were married at any time since you conceived or while you were pregnant and your husband is not the biological father of this baby, most courts require that he be notified of your pregnancy and adoption plan. Please provide your husband's permanent address, phone number w/area code, Social Security Number, and date of birth.

Physical description of your husband:

Height: _____ Weight _____ Body Build: _____

Eye Color: _____

Complexion: Fair Olive Tan Dark Other _____

Hair Color: Blonde Brown Red Gray Other: _____

If you were married when this child was conceived:

Is your husband aware of the pregnancy? Yes No Don't know

Is he aware of your adoption plans? Yes No Don't know

Will your husband consent to the adoption? Yes No Don't know

RELATIONSHIP BETWEEN BIOLOGICAL PARENTS

Is the child being placed the biological child of your current spouse? Yes No

If not, describe your relationship with the child's biological father (e.g., how long you have known him, how you met him, frequency of contact, how long you were together, etc.)

Do you know the identity of the biological father? Yes No

If yes, please provide his full name:

Please provide his birth date if you know it: _____ Don't know it

Please provide his social security number: _____ Don't know it

Please provide his driver's license number and state of issuance:

ID Number _____ State _____ Don't know it

Do you know where the biological father is now? Yes No

If so, please provide his address and phone number:

If not, please provide the following:

Last known address: _____

Last known phone number: _____

Last known place of employment (including address and phone number): _____

Names, addresses and phone numbers of his relatives (including but not limited to parents, brothers, sisters, aunts, uncles, cousins, nieces, nephews, grandparents, great-grandparents, former or current in-laws, stepparents, or stepchildren) who might know the biological father's identity and/or whereabouts: _____

Names, addresses and phone numbers of friends of the biological father:

Please give a brief description of how you and the child's biological father met, the quality of your relationship, interests shared, what you liked about him, what you didn't like, involvement during pregnancy and future relationship.

If applicable, describe your current relationship with the biological father. If you are no longer together, please state when the relationship terminated and why.

Is the biological father in any branch of the Armed Services of the United States?

Yes No Don't know

If yes, list the branch and his last known location:

Is he also the father of any of your prior child(ren)?

Yes No

Does he know about the pregnancy?

Yes No Don't know

If yes, when was he informed of the pregnancy?

Does he know of your adoption plan?

Yes No Don't know

Does he agree with your adoption plans?

Yes No Don't know

Will he sign papers to place the child for adoption?

Yes No Don't know

If yes, who first thought of the idea of adoption?

If no or unknown, please explain

Are you involved in any litigation (court action) with the biological father? Yes No

If yes, please list the type of case or legal action, where it was filed and the names of any lawyers involved:

Is there any litigation pending regarding this child (custody, paternity, support, etc.)?

Yes No

If yes, please list the type of action, where it was filed and the names of any lawyers involved:

Has the birth father lived with you before or during this pregnancy?

Yes No

If yes, when?

If the child has already been born, did you name a man as father on the child's birth certificate? Yes No

If yes, who is named as father

Has he given or offered any support financially or emotionally during this pregnancy?

Yes No If yes, explain in detail.

Has he paid or offered to pay medical expenses for you or the child?

Yes No If yes, explain in detail.

Was he ever emotionally or physically abusive to you during the pregnancy?

Yes No If yes, explain in detail.

Has he ever filed a petition to be declared the father of the child in any Court or otherwise been identified in any legal documents to be the father of the child? Yes No

If yes, what document or Court and when? _____

Please give the name, address and telephone number of any man with whom you were living with at any time when conception of the child may have occurred.

If you were living with a man during conception, is there any possibility that he may be the biological father of the child? Why or why not?

Please provide the DATE and PLACE (including the TOWN or CITY, the COUNTY, and the STATE) where conception occurred.

If uncertain, please list all places (including the TOWN or CITY, the COUNTY, and the STATE) you have lived in, traveled through, or visited where conception may have occurred, along with the DATE(S) on which conception may have occurred. **If unsure of the date, calculate the likely date of conception based upon the birth or due date of child and give information for *the period beginning one month before and ending two months after the calculated conception date.*

Please list all places (including the TOWN or CITY, the COUNTY, and the STATE) where you have resided since conception occurred.

If you are uncertain of the biological father's identity, include the description of all men with whom you had sexual intercourse in the two months before and after conception:

| | Age | Race | Height | Weight | Eye Color | Skin Color | Hair Color | Hair Texture | Build |
|------|-------|-------|--------|--------|-----------|------------|------------|--------------|-------|
| BF#1 | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| BF#2 | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| BF#3 | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |

If the child that you are planning to place for adoption has already been born, please complete the following information:

Has anyone other than you ever had physical or legal custody of the child? Yes No
If yes, who and for how long? _____

Please list every address where the child has lived from birth to present, the names of all persons who resided at each address and the time period of residence:

Has there ever been a court proceeding involving the child. If so, please list the type of proceeding (shelter, dependency, termination, paternity, custody, child support, etc.), who the parties were, where the suit was filed, whether it is still pending, its disposition or any other relevant matter.

Please list all schools the child has attended, including the city and state:

The following information is true and complete to the best of my knowledge

Print Name: _____

Signed: _____

Date: _____