

# FISHER LAW LLC

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## STEP-PARENT ADOPTION INTAKE SHEET

Consultation Date: \_\_\_\_\_ Referred By: \_\_\_\_\_

### PARENT

### STEP-PARENT

FULL name: \_\_\_\_\_ FULL name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

County \_\_\_\_\_ How Long \_\_\_\_\_ County \_\_\_\_\_ How Long \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Length of Residence in State: \_\_\_\_\_ Length of Residence in State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

State of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Present Marriage: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_

Registered In Which County: \_\_\_\_\_

### YOUR EMERGENCY CONTACT\*\*

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

\*\*Will only be used if we have communicated with you yet have not heard back within 10 days.

**CHILD/REN**

<b>First Middle Last</b>	<b>DOB</b>	<b>SS#</b>	<b>M/F</b>	<b>Resides with?</b>

Child/ren Native American? \_\_\_\_\_ If so, is child/ren registered with tribe? \_\_\_\_\_

Tribe Name: \_\_\_\_\_

Special medical/educational needs for child/ren? \_\_\_\_\_

\_\_\_\_\_

**BIOLOGICAL PARENT**

FULL Name: \_\_\_\_\_

Address: \_\_\_\_\_

County \_\_\_\_\_ How Long \_\_\_\_\_ Length of Residence in State: \_\_\_\_\_

Soc Sec #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ State of birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Will biological parent consent to adoption? \_\_\_\_\_

Your last contact w/ bio parent was on \_\_\_\_\_ via: **phone text in person** (circle one)

Is there a child support order? \_\_\_\_\_ Case # \_\_\_\_\_ State/county \_\_\_\_\_

*\*\*Please provide copy of client AND step-parent's driver's license to receptionist.*

**FOR ATTORNEY USE:**

<b>RETAINER QUOTE</b>	
Retainer	\$
Atty hourly	\$
NOTES:	
<b>SIGNATURE APPT:</b>	
<b>TO PARALEGAL:</b> _____	

SERVICE OF PROCESS: \_\_\_\_\_

NOTES: \_\_\_\_\_  
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