

THE CIRCUIT COURT FOR THE THIRD JUDICIAL CIRCUIT OF MICHIGAN FAMILY DIVISION – JUVENILE

Filing Instructions for Relative Adoptions

The mission of the Adoptions Unit is to help ensure permanently joined bonded family units through the timely completion of parental rights' termination, formal placement into approved homes, adoption finalization, and the delivery of efficient post adoption services.

General Rules

1. The Third Judicial Circuit of Michigan, Family Division, processes adoption petitions for Wayne County residents only.
2. The Court is open from 8:30 am to 4:30 pm. Appointments to initiate the adoption process will be scheduled during these hours.
3. A relative is defined as anyone who is related by blood, adoption or marriage, within the fifth degree of relationship. The relationship must be verified with certified birth certificates or certified death certificates. (See documents section for more information.)
 - a. Relatives who adopt are not normally eligible for support subsidy through the State of Michigan. Any Medicaid and/or ADC benefits the child is receiving may terminate upon entry of the Order of Adoption. It is suggested you contact the agency where funds are received to determine if the benefits will continue after the adoption has been granted.
4. **If you are also a guardian of the child(ren), this is not the correct instruction packet. Please request a Guardian Instruction packet.**
5. Termination of parental rights of the biological parents must occur prior to an adoption being granted, either on a voluntary or involuntary basis. This includes legal parents (an identified father who has established paternity or who has been ordered to pay child support, and the biological mother not having custody), the putative (alleged) father, or the unknown father.
6. Before an adoption can occur the child(ren) must be living in the petitioner's home for at least six months . Motions for exception may be requested and will be heard by the assigned adoption judge.

a. VOLUNTARY TERMINATION

- i. If the biological parents are willing to consent to the adoption, an actual verification through a conversation or mail correspondence has been ascertained, the parents may consent to the adoption once the Petition for Adoption has been accepted and filed.
 1. If either of the consenting parents resides in Wayne County, the parents must appear at the Third Circuit Court of Michigan, Family Division, Juvenile Section, 1025 E. Forest Avenue, Detroit, MI 48207-1098, to execute a Consent to Adoption by Parent before a Referee or Judge. (See the General Rules section of these instructions for further information regarding when consents may be taken)

OR

2. If either of the consenting parents resides outside of Wayne County, a Consent to Adoption by Parent will be mailed to the parent, with instructions that the consent must be executed in accordance with the laws of that county/state after the Petition for Adoption is filed.

b. PARTIAL INVOLUNTARY TERMINATION – Putative Father (alleged) and, PARTIAL VOLUNTARY TERMINATION – Mother Consents

- i. The biological mother must be present at the initial screening and interview process if the following conditions exist:
 - The biological mother is willing to consent
 - The child was born out of wedlock

AND

 - The biological father is unknown or is unwilling to consent to the adoption.
 - There has been no support order entered ordering a father to financially support the adoptee.
- ii. The biological mother must file a Petition for Hearing to Identify Father to Determine or Terminate His Rights when the Petition for Adoption is filed. (Other forms may be necessary and will be determined on a case by cases basis.) A court hearing will then be scheduled, at which time the biological mother must appear.

c. INVOLUNTARY TERMINATION OF ALL PARENTAL RIGHTS

- i. If the following conditions exist an attorney must file a petition to terminate parental rights at the Third Circuit Court of Michigan, Wayne County Clerk’s Office, Case Initiation Unit, Room 301, Building B. The Petition for Termination must request termination of parental rights as well as for the Court to Consent to the Adoption by the relative:
 - Mother’s location is unknown
 - Mother is not willing to consent to the adoption

OR

 - Mother is willing to consent to the adoption, or is deceased, and the father has either established paternity or was ordered to pay support and is not willing to consent to the adoption – **OR** his location is unknown.

FOR AN ATTORNEY REFERRAL, PLEASE CALL (313) 961-3545

7. If an adoption is not granted, the termination of parental rights order will be set aside.
8. Prior to an adoption being granted a home investigation must be completed. A referral for the home investigation will be made after the Petition for Adoption has been filed. You will be contacted by the Michigan Children’s Law Center (MCLC) to set up a date for the home visit. You must discuss the adoption process with the child(ren) being adopted, prior to the home investigation. All members of the home must be available for the home investigation.
9. A subsequent office appointment may be necessary, should subsequent information be required, after the Petition for Adoption has been filed.

10. Biological parents (legal and putative) and adoptee(s) 14 years or older may consent to the adoption at the Court. Consent hearings are heard daily at 8:30 am, before a Referee or Judge. A party wishing to consent must appear in the Adoptions Unit, Room 414, fifteen minutes prior to the above time. If the consenting parent is a minor (under the age of 18), a parent, or guardian must accompany the minor parent to court. Consenting parents need to present some form of photo identification.

Qualifications for the Acceptance and Processing of the Adoption Petition

1. Petitioners and/or Adoptee must be residents of Wayne County. (Proof of residence is required)
2. Adoptee(s) 14 years and older must consent to the adoption. (See above in the General Rules section, #5 for more information regarding consents)
3. Petitioners must discuss the adoption process with the child/children to be adopted. This should be an on-going process that starts before the Petition for Adoption is filed and continues, periodically, as the child/children get(s) older.
4. The Court will not accept a Petition for Adoption if a petitioner has been convicted of any of the following offenses:
 - a. Accosting, enticing or Soliciting Children for Immoral Purposes
 - b. Production of Child Pornographic Material
 - c. Criminal Sexual Conduct (I-IV)
 - d. Assault with Attempt to Commit Criminal Sexual Conduct
5. Upon Judicial Review, the Court may not grant a Petition for Adoption if any of the following conditions exist:
 - a. Three, or more traffic convictions involving alcohol without verifiable proof of rehabilitation.
 - b. Any felony convictions within the past ten years.
 - c. Protective Services involvement with substantiated complaints within the last five years.
 - d. Support arrearages for children from previous relationships.
 - e. Pending criminal or child protective cases.
 - f. Outstanding warrants.
 - g. Health or mental problems that would restrict the petitioner from adopting.
6. If any concerns are noted during the screening process, a subsequent meeting and/or court hearing may be required.

Fees

1. A one hundred sixty dollar (\$160.00) filing fee, per adoptee, payable either by cash, money order, or attorney check, must be paid at the time the Petition for Adoption is filed. Personal checks are not accepted. Money orders and attorney checks should be made payable to the Wayne County Clerk.
2. For adoptees born in Michigan, a check or money order payable to the State of Michigan in the amount of \$50.00, to cover the processing and issuance of the new birth certificate must be paid. Additional

copies may be purchased for \$16.00 per copy. For adoptees born outside the State of Michigan, the fee for the new birth certificate varies from state to state.

3. The filing fee may be waived, if the petitioner is receiving public assistance or is on a fixed income. Verifiable proof of income (i.e. current Medicaid Card for the family, pay stubs, income tax returns for the previous year) must be submitted at the time of the office interview/appointment. The fee for the new birth certificate cannot be waived.

Documents

1. The following documents, if applicable, are required to file the Petition for Adoption. Certified or true copies of each of these documents are required. All foreign documents must be translated into English and must be certified by a certified translator. Hospital “verifications” of birth, and photocopies (non certified or true copies) of documents **will not** be accepted:
 - Adoptees birth certificate.*
 - Petitioners’ birth certificate.
 - Petitioners’ marriage certificate to each other, as well as any previous marriage certificates for either petitioner.
 - All divorce decrees.
 - Death certificate if a previous marriage ended because of the death of a spouse.
 - Death certificate if the mother or father of the adoptee is deceased.*
 - Acknowledgment of Paternity.*
 - Order of Filiation or Support Order (when the mother and father of the child were not married).*
 - All name change orders.
 - Birth or death certificates showing relationship to the child if petitioners are relatives.
2. Other documents that are required, if applicable:
 - If the petitioner(s) have children from a previous relationship a Friend of the Court letter/summary detailing the status of child support, which must include payment and arrear information*
 - If child support has been ordered for the child(ren) being adopted, a Friend of the Court letter/summary detailing the status of the child support, which must include payment arrear information.*
 - A letter must be sent to the biological parent notifying them of the intent to initiate the adoption process and that their consent is needed. This letter must be sent certified. A copy of the letter and the certified receipt card must be submitted to the court when filing the petition for adoption. If the biological parent’s address is unknown, letters should be sent to any last known address, or any known employers, relatives or friends. **This must be done prior to requesting an appointment to file the petition for adoption.***
 - Clearances from any past criminal conviction or any alcohol related traffic violations that show all fines and/or conditions have been satisfied.*
 - If petitioner(s)/adoptee(s) are not U.S. citizens, the following documentation is required, if applicable: valid Resident Alien Card, valid Visa from Immigration & Naturalization Services, Naturalization documentation (certified/original).
 - The petitioner(s), as well as other adults in the home are required to obtain and bring to the appointment a Central Registry Clearance (child protective services). The clearance may be

requested at any local Department of Human Services (DHS) office, or at DHS South Central Operations, 1801 E. Canfield, Detroit, MI 48207. **NOTE:** If the petitioner is a female, clearances must also be completed on her current married name (if married), as well as her maiden name, and any other previous names used during previous marriages.

- Medical clearances for all household members must be submitted at the time the Petition for Adoption is filed. The clearances must be signed by a physician, and be dated within the past 12 months. Please see the attached health appraisal forms, which can be used for the adoption. Electronic physician signatures will be accepted.*
- Three personal reference letters must be submitted at the time the Petition for Adoption is filed. The references must be from non-relatives and from non-household members. Also, the letters must be signed (original signatures), include contact information (address and telephone number) and dated within the past 12 months.*
- Completed Adoption Report (MJC 1078) - attached.*

3. Proof of Residency:

- Valid Michigan Driver's License or State I.D. for the petitioner(s).

***The Adoptions Unit will retain these documents.**

Filing the Petition for Adoption

1. The Adoptions Unit is located on the 4th floor of Building B in the James H. Lincoln Hall of Juvenile Justice. 1025 E. Forest Avenue, Detroit, MI 48207-1098.
2. The prospective adoptive parent(s) or attorney must call (313) 833-1880 to schedule an appointment to initiate the adoption process.
3. If any petitioner requires a language interpreter, please make this request at the time you schedule the appointment. The court will request an interpreter be present at the appointment on your behalf.
4. The attached Adoption Report (MJC 1078) must be completed prior to the scheduled office appointment.
5. The prospective adoptive parent(s) must be present at the scheduled appointment time, unless being represented by an attorney.
 - Should you retain an attorney to represent you, the attorney must review the "Attorney Instruction" packet and prepare the required forms.
6. During the scheduled office appointment all of the required documents will be screened and clearances/record checks will be completed in the following areas:
 - LEIN system (criminal)
 - Juvenile neglect/delinquency search
 - Third Circuit Court of Michigan – Friend of the Court
7. Should all of the criteria be met, the Petition for Adoption will be prepared and the case will be processed in a timely manner. Once termination of parental rights occurs there is a 21-day appeal period that must pass prior to the adoption being finalized.
8. Should the Court approve the adoption the necessary information will be forwarded to the appropriate state vital records department to create the new birth certificate.

STATE OF MICHIGAN THIRD CIRCUIT COURT WAYNE COUNTY	ADOPTION REPORT	FILE NO.
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Complete this entire form. Print or type the entire report. If certain areas do not apply, write or type N/A. If more space is needed, use the back side of the form.

PETITIONERS INFORMATION

	PETITIONER 1	PETITIONER 2
Name (First, Middle, Last)		
Birth Date		
Social Security Number		
Driver License Number		
Address City, State and Zip		
Telephone Number		
Petitioner's Mother's Name and Date of Birth (Parent of person adopting)		
Petitioner's Father's Name And Date of Birth (Parent of person adopting)		
Education Level (Name of School & Grade Completed)		
Employer		
Job Title		
Current Yearly Income		
Military History (if yes, indicate date of discharge)		
Chronic or Terminal Illnesses		
Date of Last Physical Exam		
All Previous Marriages (if yes, name of spouse(s))		
Has support been ordered for any other child from a previous marriage or relationship?		
List all Criminal Convictions		

Are there any pending warrants for your arrest? (If yes, list the district of the offense.)		
List all Alcohol-Related Traffic Convictions		
Child Protective Services Involvement		
Did the biological/custodial parent ever receive aid from the State? If yes, when? (Step-Parent adoptions only).		
Have you previously been approved to adopt a child? If so, when? Also, if an agency was involved, please name the agency.		
Are you currently, or have you ever been a licensed foster parent? If so, through which agency?		

ADOPTEE INFORMATION

(Child(ren) to be Adopted)

Name (First, Middle and Last)	
Date of Birth	
Social Security Number	
Place of Birth (city, county, state)	
Length of time in home	
Physical Health	
Grade in School	
Hobbies	
Adoptee's feelings regarding the Adoption	
Gender (M or F) & Race	
Is the adoptee a Native American Indian, if so, which tribe.	
Marital Status (only applicable for Adult Adoptions: single married, divorced, separated or widowed).	

**ALL OTHER ADULTS CURRENTLY
RESIDING IN THE HOME**

NAME	GENDER (Male/Female)	RACE	MARITAL STATUS	SOCIAL SECURITY NUMBER	DATE OF BIRTH

ALL OTHER CHILDREN CURRENTLY RESIDING IN THE HOME

NAME	GENDER (Male/Female)	RACE	SOCIAL SECURITY NUMBER	DATE OF BIRTH

BIRTH PARENT INFORMATION

	BIOLOGICAL FATHER	BIOLOGICAL MOTHER
Name (First, Middle, Last)		
Birth Date		
Social Security Number		
Address City, State and Zip		
Name of Mother of Biological Parent		
Name of Father of Biological Parent		
Siblings of Biological Parent		
Education Level (Name of School & Grade Completed)		
Physical Description		
Current Employment		
Current Marital Status		
Name of Spouse		
Names of other children from previous or current relationships/marriages		
Chronic or Terminal Illnesses		
Did the biological mother ever receive aid from the State? If yes, when?	N/A	
Race		

Falsification of any information on this form may result in the Petition for Adoption being denied.

Petitioner's Signature

Date

Petitioner's Signature (if two-parent adoption)

Date

PHYSICIAN'S REPORT FOR ADOPTIVE APPLICANT

Third Circuit Court of Michigan
Family Division - Juvenile Section
Adoptions Unit
1025 E. Forest Avenue
Detroit, MI 48207-1098

Re: _____
DOB: _____

Dear Dr. _____,

I hereby authorize you to release to the Third Circuit Court of Michigan Family Division - Juvenile Section, Adoptions Unit, information regarding my current and past physical and mental health.

Sincerely, _____

TO BE COMPLETED BY THE PHYSICIAN

Date of physical examination _____ Length of time know to physician _____

ANY HISTORY OF:

Alcohol or Drug Dependency	_____	Diabetes	_____
Cardiac Disease	_____	Mental Illness	_____
Cancer	_____	Depression	_____
Epilepsy	_____	Allergies	_____

Diseases, injuries, surgeries, disabilities, or medical conditions not referred to above: _____

Remarks on health history: _____

CURRENT HEALTH STATUS:

Height	_____	Blood Pressure	_____
Weight	_____	Vision	_____
Heart	_____	Hearing	_____
Lungs	_____	Abdomen	_____

Medication currently prescribed; dosage and purpose: _____

Essential findings that are deviations from normal: _____

HIV information (optional): _____

Remarks on medical examination **(on the basis of the medical history and present physical condition, please state any medical concerns you may have regarding this adoptive applicant):**

Would you like to discuss this information with a Social Worker? Yes _____ No _____

PLEASE PRINT OR TYPE

Physician's Name _____

PHYSICIAN'S SIGNATURE

Address _____

City, State, Zip Code _____ Telephone Number _____

PHYSICIAN'S REPORT FOR A CHILD

Third Circuit Court of Michigan
Family Division - Juvenile Section
Adoptions Unit
1025 E. Forest Avenue
Detroit, MI 48207-1098

Re: _____
DOB: _____

Dear Dr. _____,

I hereby authorize you to release to the Third Circuit Court of Michigan Family Division - Juvenile Section, Adoptions Unit, information regarding my current and past physical and mental health.

Sincerely, _____

TO BE COMPLETED BY THE PHYSICIAN

Date of physical examination _____ Length of time know to physician _____

Diseases or illnesses known or treated by you in the last five years: _____

CURRENT HEALTH STATUS:

Height _____ Weight _____

Medications currently prescribed; dosage and purpose: _____

ANY HISTORY OF:

Allergies _____ Asthma _____
Other _____

Childhood Diseases: _____

Hospitalizations, operations, or injuries: _____

HIV information (optional): _____

IMMUNIZATIONS

DATES OF ORIGINAL SERIES

BOOSTERS

DPT	_____	_____	_____	_____
Polio	_____	_____	_____	_____
MMR	_____	_____	_____	_____
HIB	_____	_____	_____	_____
Hepatitis B	_____	_____	_____	_____
Chicken Pox	_____	_____	_____	_____

Remarks on medical examination (**on the basis of the medical history and present physical condition, please state any medical concerns you may have regarding this child**): _____

Would you like to discuss this information with a Social Worker: Yes _____ No _____

PLEASE PRINT OR TYPE

Physician's Name _____

PHYSICIAN'S SIGNATURE

Address _____

City, State, Zip Code _____ Telephone Number _____