



# Application for adoption information by an adopted child or his or her prospective adoptive parent/s or adoptive parent/s

Adoption Act 2009 (sections 254, 256 and 282)

Adoption Regulation 2020

## The purpose of the form

Identifying information about an adopted child may be released only if written consent is given by each birth parent identified by the information, and the child's prospective adoptive parent/s, or adoptive parent/s, give their consent.

Upon receiving an application for adoption information about a birth parent from an adopted child, or their prospective adoptive parents, or their adoptive parent/s, Adoption Services must take steps to contact the birth parent/s to ask if they wish to consent to the release of information, except in circumstances where Adoption Services is aware that the birth parent/s does not wish to give consent, or does not wish to be contacted for the purpose of obtaining consent.

Adoption Services may provide or may arrange for information, counselling and support to be provided to assist the applicant/s in relation to their application. This may include providing personal information about the child and prospective adoptive parent/s, or adoptive parent/s, to another party in order to help them with their decision to consent to the release of identifying information.

With the prospective adoptive parent/s', or adoptive parent/s', consent, the child's birth parent/s may receive identifying information about the adopted child and his/her prospective adoptive parent/s, or adoptive parent/s, if they apply for identifying adoption information. Identifying information would include the names of the child and prospective adoptive parent/s, or adoptive parent/s, at the time of the adoption and copies of certain documents; including the adoption order and consent documents.

With the prospective adoptive parent/s or adoptive parent/s', consent, the birth parent/s may also be given the adopted child's current name and address as provided on this form. Consent to the release of the adopted child's current name and contact details can be provided using this form or the applicant/s may want to consider giving consent at a future time.

If you are an **adopted child** please complete **Part A** and ensure that your prospective adoptive parent/s, or adoptive parent/s, completes **Part B** of this form. If you are a **prospective adoptive parent/s, or adoptive parent/s**, applying for information about your child's birth parent/s please complete **Part C** of this form.

## Proof of identity

You are required to provide the original or a certified copy of two documents to prove your identity, for example: a drivers licence, passport, birth certificate, pension card, credit card, Medicare card or student card. The full list of identification documents that may be accepted is available on page 7 of this form. Both documents must be in your current name and, between them, contain your date of birth and signature.

If your name has changed since the time of the adoption, please provide evidence of this in addition to the two forms of identification as mentioned above; such as a marriage certificate or deed poll certificate.

Please sign this form in the presence of an appropriate witness. An appropriate cannot be a relative and includes:

- An officer of the Department of Child Safety, Youth and Women
- A lawyer or notary public
- A Justice of the Peace or Commissioner for Declarations
- A Police Officer
- A medical practitioner

Information to assist you to locate a Justice of the Peace is available at: <http://www.justice.qld.gov.au>. Further information about applying for adoption information is available on the on the Queensland Government website <http://www.qld.gov.au/community/caring-child/how-request-adoption-information/>

## Please return completed form to:

### by mail to:

Adoption Services  
Department of Child Safety, Youth  
and Women  
Locked Bag 3405  
Brisbane QLD 4001

### Assistance in completing this form is available from:

Adoption Services  
Telephone: **3097 5100** or  
**1800 647 983** (free call within  
Queensland)  
  
Post Adoption Support Queensland  
Telephone: **1300 914 819**



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## Part A – applicant – adopted child to complete

Current Surname			
Current given name/s			
Your name at the time of adoption (if different to current name)			
Date of birth		Gender	
Residential address	Number and street address: ..... ..... State/Territory:.....Postcode:.....		
Postal address	<input type="checkbox"/> As above Number and street address / PO Box: .....Suburb: ..... State/Territory:.....Postcode:.....		
Telephone numbers  Please mark with an * which is your preferred contact number	Home: ..... Mobile: .....		
Email Address (if applicable)			
Are you of Aboriginal or Torres Strait Islander descent?	<input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Aboriginal and Torres Strait Islander <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> No <input type="checkbox"/> Unknown		
Name of prospective adoptive parent 1 / adoptive parent 1			
Name of prospective adoptive parent 2 / adoptive parent 2			



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### Adopted child's declaration (if applicable)

I  (print full name)

hereby make an application for pre-adoption information and declare that all the information provided in this application is true and correct to the best of my knowledge.

Signature of child:  Date:

Place (city/town):

### Part B – Prospective adoptive parent/s, or adoptive parent/s, consent to an application for identifying pre-adoption information being made by his or her adopted child

**An application for identifying pre-adoption information can only be made by an adopted child with the consent of his/her prospective adoptive parent/s, or adoptive parent/s**

Please complete this section to indicate whether you give your consent for your adopted child to make this application:

#### Prospective adoptive parent one / Adoptive parent one to complete

Yes - I consent to  (name of child) making an application for identifying pre-adoption information

Signed:  Date:

#### Prospective adoptive parent two / Adoptive parent two to complete

Yes - I consent to  (name of child) making an application for identifying pre-adoption information

Signed:  Date:

### Part C – Release of child's current name and details

You do not have to complete this section and can choose to wait until such a time an application is made by the birth parent/s, at which time you will be contacted by Adoption Services to discuss your wishes

Although you are completing this form to give consent to your child applying for their pre-adoption information, you may wish to take this opportunity to provide consent to your child's current name and contact details (as provided in this form) being given to his/her birth parent/s or eligible birth relative if an application for adoption information is made by him/her.

- Yes – I consent to the release of my child's current name and \*postal address and/or \*residential address and/or \*email address and/or \*telephone number (**\*please circle one or all**) being given to a birth parent/s or eligible birth relative.
- No – I do not consent to the release of my child's current name and contact details to a birth parent/s or eligible birth relative.

Prospective adoptive parent one / Adoptive parent one

Signed:  Date:

Prospective adoptive parent two / Adoptive parent two

Signed:  Date:



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**Part D – This section is to be completed by prospective adoptive parent/s or adoptive parent/s applying for identifying pre-adoption information about their adopted child.**

	Prospective adoptive parent one / Adoptive parent one	Prospective adoptive parent two / Adoptive parent two
Preferred title (for example, M, Mrs, Dr, Ms)		
Current full name		
Previous name/s		
Date of birth		
Place of birth		
Residential address	Number and street ..... ..... Suburb ..... State/Territory..... Postcode.....	Number and street ..... ..... Suburb ..... State/Territory..... Postcode.....
Postal address	As above <input type="checkbox"/> POBox..... ..... Suburb ..... State/Territory..... Postcode.....	As above <input type="checkbox"/> POBox..... ..... Suburb ..... State/Territory..... Postcode.....
Phone numbers <small>(please mark with an * which is your preferred number)</small>	Home..... Mobile..... Work.....	Home..... Mobile..... Work.....
Email address (if applicable)		
Are you of Aboriginal or Torres Strait Islander descent?	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Islander <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Islander <input type="checkbox"/> No <input type="checkbox"/> Unknown



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## Part D – Details of adopted child

Current surname	
Current given name/s	
Name at time of adoption (if different)	
Date of birth	
Place of birth (if known)	
Date of adoption	
Gender	
Is the child deceased?	<input type="checkbox"/> No <input type="checkbox"/> Yes – please attach a certified copy of death certificate to this form

## Child's views (if applicable)

Is your child aware that you are applying for his or her identifying pre-adoption information?

Yes    No    Not applicable

Is your child aware that Adoption Services will need to contact him or her to ask for his or her views about your application (having regard to the adopted child's age and understanding)?

Yes    No    Not applicable

## Part E – Proof of identify and declaration

I have enclosed a certified copy of two proof of identification documents with this application.

### Prospective adoptive parent one / Adoptive parent one

Identification Document 1

Identification Document 2



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**Prospective adoptive parent two / Adoptive parent two**

Identification Document 1

Identification Document 2

**Child (if applicable)**

Identification Document 1

Identification Document 2

**Prospective adoptive parent/s or adoptive parent/s, declaration**

I  and   
(print full name) (print full name)

hereby make an application for adoption information and declare that all the information provided in this application is true and correct to the best of my knowledge.

**MUST BE SIGNED AND DATED IN THE PRESENCE OF THE WITNESS**

Applicant's Signature (one)		Applicant's Signature (two)	
Date and place	/ / at:.....	Place/city town	/ / at:.....

**Note:** It is an offence under the *Adoption Act 2009* for any person to knowingly provide false or misleading information.

**Certificate of witness**

Witness's full name			
Qualification	<input type="checkbox"/> Justice of the Peace <input type="checkbox"/> Lawyer <input type="checkbox"/> Doctor <input type="checkbox"/> Commissioner for Declarations <input type="checkbox"/> Police Officer <input type="checkbox"/> An Officer of the Department of Child Safety, Youth and Women		
Registered number		Phone number	
Address			

The applicant showed me two documents that provide proof of his or her identity and this application was signed by the applicant in my presence on:

Date  at place   
(insert suburb and State)

**Witness signature**



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## LIST OF RELEVANT IDENTITY DOCUMENTS

### Schedule 1 Relevant identity documents

- a birth certificate
- a citizenship certificate
- an Australian passport that is current or has been expired for less than two years
- a current overseas passport
- a current drivers licence containing the person's photograph
- a current photo identification card under the Photo Identification Card Act 2008 (including a current adult proof of age card that continues in force under that Act as a photoidentification card) or a corresponding card under the law of another jurisdiction
- a current document evidencing the person's residency or visa status
- a current Medicare card, pensioner concession card, health care card or another identification card issued by the Australian government as evidence of a person's entitlement to a benefit
- a current positive notice blue card issued under the *Working with Children (Risk Management and Screening) Act 2000*
- a telephone, gas or electricity account (not more than one year old)
- a current credit card, debit card or other account card from a financial institution (which includes an embossed name and signature)
- a passbook or statement of account from a financial institution (which is not more than one year old)
- a notice of rates from a local government (that is not more than one year old)
- a current student identity card containing the person's photograph or signature issued by a school or another educational institution
- a Queensland Government employee identity card (which contains the person's photograph)
- an Australian State police officer, Federal police officer or Australian Defence Force identity card containing the person's photograph
- a current crowd controller's licence, private investigator's licence or security officer's licence issued under the *Security Providers Act 1993*
- a current licence issued under the *Weapons Act 1990*.

The two forms of certified identification documents that you provide with your application must be in your current name and, between them, contain your date of birth and signature.

#### Privacy Notice

The *Adoption Act 2009* authorises the Department of Child Safety, Youth and Women to collect the information on this form for the purposes of assessing your application for adoption information, and where applicable, the provision of the relevant identifying and non-identifying information. The Department of Child Safety, Youth and Women may provide some or all of this information to the Queensland Registrar, Registry of Births, Deaths and Marriages and/or to a relevant tribunal or court or person as authorised under the Act. All information obtained in the process of assessing your application for adoption information, and where applicable, the provision of the relevant identifying and non-identifying information will be managed in accordance with the Information Privacy Principles described in the *Information Privacy Act 2009*.