

NON-ID REQUEST

YOUR NAME
Your Street
Your City, State and zip
Your area code and phone number

Office of Vital Records
The Department of Health
Address
Your City, State and zip

Re: Request for Identifying or Non-Identifying Information

To Whom It May Concern:

I am a mature adult adoptee and I hereby formally request photocopies of the original following records that are held in my file as opposed to a summary:

Identifying Information
Non-Identifying Information
Petition To Adopt
Relinquishment papers
Change of Name
Certificate of Adoption
Adoption Decree
Finalized Court Papers

My adopted name is *your Name* and I was born on *your birth date* at *your birth* Hospital in *City, State and zip*. My adoption was finalized on *your adoption date*. [OR I do not know the date that my adoption was finalized.]

The names of my adoptive parents are:

adoptive mother
adoptive father

In the alternative, I would greatly appreciate answers to as many of the questions below as possible.

What name was I given at birth?
What was the name of the hospital I was born in?
What was the name of the attending physician?
Do I have brothers or sisters?
What are their names and ages?
What are the nationalities of my birth parents?
Were my birth parents married, and if so, for how long before the adoption?
What were the occupations of my birth parents?
How old were my birth parents at the time of my adoption?
What was the physical description of my birth parents?
What are my birth parents names?
When and where were my birth parents born?

What were the religious preferences of my birth parents?
Was I baptized? If so, where?
What was the education level of my birth parents?
Were my birth parents members of any branch of the military or reserves?
Was I ever in foster care as an infant? Group home? Maternity home?
Which court finalized this adoption?
What was the judge's name?
Did both my birth mother and birth father sign relinquishment papers?
Who did the home study on the adoptive parents?
Was medical information on my birth parents left in my file?

If you are unable to comply with my request, please cite the specific law that prohibits the release of this information to me and please advise me where I should write to obtain the information. I have enclosed a self-addressed-stamped-envelope for your convenience and I look forward to your quick response.

Copies of my current birth certificate and driver's license or other legal identification are included with this legal authorization letter.

DATED this _____ day of _____ 20____.

Respectfully Submitted By:

Your Name typed here

SUBSCRIBED and SWORN to before me on
this _____ day of _____, 20____.

NOTARY PUBLIC

Copied to: *(list names of adoption agency and/or attorney. If not known, delete this part)*