

State of Maine
Department of Health and Human Services
Foreign Born Adoption

				Year:	Number:
Adopting Parent(s) must furnish and verify personal information which will appear on new birth certificate. (If errors in this section, an additional fee is required to amend the record)					
Adoptive Parent	1. First Name		2. Middle Name		3. Last Name
	5. Date of Birth (mm/dd/yyyy)		6. Birthplace (State or foreign country)		4. Name Prior to First Marriage
	8. Race – Specify (American Indian, Black, White, etc.)		9. Ancestry- Specify (French, English, Irish, etc.)		
	10. Marital Status (Check one) <input type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Domestic Partner				
	11. Adopting Parent Signature ▶				
Adoptive Parent	12. First Name		13. Middle Name		14. Last Name
	16. Date of Birth (mm/dd/yyyy)		17. Birthplace (State or foreign country)		15. Name Prior to First Marriage
	19. Race – Specify (American Indian, Black, White, etc.)		20. Ancestry- Specify (French, English, Irish, etc.)		
	21. Marital Status (Check one) <input type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Domestic Partner				
	22. Adopting Parent Signature ▶				
Parent's Address	23. Mailing Address				24. City or Town
	25. County		26. State		27. Zip Code
	28. Do parents want a new birth certificate established? (If no, complete certification on page 2) Yes No		29. Do parents want the new birth certificate to bear an asterisk next to the items changed by the adoption? (If yes, complete certification on page 2) Yes No		
	30. Attorney's Name and Address				
Petitioner will complete this part of the report. Please copy entries directly from certified copy of the birth record presented to court.					
Child	31. First Name		32. Middle Name		33. Last Name
	35. Date of Birth (mm/dd/yyyy)		36. Birthplace (State or foreign country)		34. Suffix
	38. Race – Specify (American Indian, Black, White, etc.)		39. Ancestry- Specify (French, English, Irish, etc.)		
	40. City or Town of Birth		41. County of Birth		42. Country of Birth
	43. Parental Status of Child (Check one) <input type="checkbox"/> Both Parents Deceased <input type="checkbox"/> One Parent Deceased <input type="checkbox"/> Parents Alive/Together <input type="checkbox"/> Parents Alive/Separated/Deserted <input type="checkbox"/> Parents Alive/Divorced <input type="checkbox"/> Born Out of Wedlock <input type="checkbox"/> Surrogate Parent <input type="checkbox"/> Status Unknown				
Parents	44. First Name		45. Middle Name		46. Last Name
	48. First Name		49. Middle Name		50. Last Name
47. Name Prior to First Marriage					
51. Name Prior to First Marriage					
Probate Court Information					
Probate Court Seal	52. Placement: <input type="checkbox"/> Department of Health and Human Services <input type="checkbox"/> Other Specify:				
	Certificate of Adoption of Foreign Born Person I hereby certify that on _____, _____ (mm/dd/yyyy) (Adoptive parent) and _____ (Adoptive parent) were given leave to adopt the individual identified above and that the legal name was changed to _____ (First, middle, last and suffix).				
	Certificate of Recognition of Foreign Adoption I hereby certify that on _____, the adoption of _____ (mm/dd/yyyy) (Original identity of adoptee) in the country of _____ (Country) was recognized by this court and that the child's name shall be changed to _____ (First, middle, last and suffix).				
	53. Registrars Signature and Seal ▶				54. Date Signed (mm/dd/yyyy)
	55. Provide Name of Maine County Probate Court		56. Date Petition Filed (mm/dd/yyyy)		57. Adoption Docket Number
Data, Research, and Vital Statistics (DRVS) Use Only					
\$60.00 Registration Fee Enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$6.00 Additional Copies Requested? <input type="checkbox"/> Yes <input type="checkbox"/> No		Check Number	Date Paid



Maine Center for Disease Control and Prevention (Maine CDC)
220 Capitol Street
11 State House Station
Augusta, Maine 04333-0011
(207) 287-3771
Fax : (207) 287-1093 TTY Users: Dial 711 (Maine Relay)

No New Birth Certificate After Adoption

As provided by 22 M.R.S.A. 2765(1)(A), we/I request that a new birth certificate **shall not** be established for the individual identified on this Certificate of Adoption.

Adopting Parent's Signature

Adopting Parent's Signature

OR

Adopted Person if 18 years of age or older

New Birth Certificate Annotated with Asterisk (*) to show Items Changed by Adoption

As provided by 22 M.R.S.A. 2765(2-A)(A)(1), we/I request that all items on the new certificate that have been revised by the adoption decree be identified, and that the notation "court action" and the date of the adoption decree be shown on the new certificate.

Adopting Parent's Signature

Adopting Parent's Signature

OR

Adopted Person if 18 years of age or older