

AAA Partners in Adoption, Inc.

5665 Hwy. 9, Suite 103-351
Alpharetta, Georgia 30004
(770) 825-2028

Melissa Clause
Executive Director

HOME STUDY APPLICATION

This application process will determine your eligibility to undergo a home study evaluation for the adoption of a child. Information that you provide is considered by us as strictly confidential. Once we receive and approve your application we will immediately schedule a visit between you and your adoption consultant. We thank you for considering us to be your partner in this important process.

Sincerely,
Melissa Clause, Executive Director

When applying by mail, or email at aaapia@aol.com, please send this signed application along with the following signed releases:

- Release of Information-Georgia DFCS (Signed by applicants)
 - Release of Information-Georgia Criminal History (Signed by applicants)
 - HIPPA Release-Child Protective Services (Signed by applicants and all others 18 or older living in the home)
 - HIPPA Release-Sex offender Registry- (Signed by applicants and all others 18 or older living in the home)
- (Attach additional HIPPA releases signed by anyone 18 or older living in your home)

If you are applying online, you may send this application with the releases to our email address (aaapia@aol.com).

Date: _____

Last Husband Wife Maiden Name

Address Street City State Zip

County _____ How long at this address? _____

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*If you have not lived in Georgia for the past 5 years consecutively, please list your previous addresses (include counties, and dates of residence).

Contact Information:

Home Phone _____

Wife Office Phone _____ Cell _____ Email _____

Husband Office Phone _____ Cell _____ Email _____

HUSBAND

WIFE

Date of Birth

Place of Birth

Naturalization Date

Place & Serial No.

Social Security No.

Race

Extent of Education

Date and Place of Marriage

Number of Previous Marriages

Termination Date(s) and Place(s)

Occupation

Employer

Annual Earnings

Other Income Sources

Amount and Form of Savings

Have you ever been arrested? Yes/ No (circle one)

If yes, please provide date of arrest(s), all charges pertaining to each arrest(s) as listed on arrest record, and Judicial Disposition(s) as listed on arrest record. Failure to provide accurate criminal history information may result in the termination of home study evaluation process and forfeiture of all fees provided to AAA Partners in Adoption, Inc. **A criminal record does not preclude application to AAA PIA nor does a criminal record preclude a favorable recommendation of the home study.**

Have you ever been contacted by the Department of Family & Children's Services regarding an allegation of child abuse or any other child-related issue? Yes/No (circle one) If yes, please explain.

PRESENT JOB: _____ Since (date)

Husband _____

Wife _____

CHILDREN:

Name _____ Age (Adopted or Biological)

1. _____

2. _____

3. _____

(Please include step-children, (age), and grown children, (age), living outside the home.)

OTHERS LIVING IN THE HOME

Name _____ Age _____ Relationship _____

Have you ever applied for or adopted a child from another adoption agency?

When and from what source? _____

Have you ever received an unfavorable recommendation from another adoption agency?

Yes ___ No ___

How did you hear about AAA Partners in Adoption, Inc. (also known as "Partners")?

A "Partners" website- www. _____

Another website- www. _____

Another "Partners" family _____

Family member or friend _____ Phone Book _____

Another Adoption Agency _____

Social Worker _____

Adoption Support Group _____

Other _____

CHILD / CHILDREN DESIRED: Age Range _____

Sex Preference _____

Siblings: Yes ___ No ___ Special Needs: Yes ___ No ___

List the Placement Agency that you have selected, if applicable:

CONTRACT FOR ADOPTIVE HOME STUDY EVALUATION APPLICATION

This is an agreement by and between the applicant(s) and AAA Partners In Adoption, Inc., herein referred to as Partners, for an Adoptive Home Study Evaluation.

We, the applicant(s) _____ are desirous of becoming adoptive parents for one or more minor children. Therefore, the applicant(s) and Partners agree to the following:

APPLICANT(S)

- a. We have received, read and retained a copy of Partners' manual, Policies and Procedure for Adoption. We understand that this manual is made a part of this agreement, and we will abide by its provisions.
- b. We understand that we must comply with all applicable adoption regulations established by the State of Georgia.
- c. The applicant(s) understand that as a pre-adoption requirement the State of Georgia requires that the agency conduct an Adoptive Home Study Evaluation with the applicant(s) and that certain fees will be required from the applicant(s) for the completion of the Adoptive Home Study Evaluation.
- d. A Home Study Evaluation Fee of \$900.00 is due and payable in three equal payments. \$300.00 is due and payable at the first visit. \$300.00 is due and payable on visits two and three. THIS FEE IS NON REFUNDABLE.
- e. The Agency will conduct post-placement visits in the home as required for the adoption. A fee of \$150.00 is due and payable at the time of each visit. THIS FEE IS NON REFUNDABLE.
- f. All adoptive families must secure a criminal background check from the Georgia Bureau of Investigation (GBI) and the Federal Bureau of Investigation (FBI). Home Study Clients will be provided with an instruction sheet in their acceptance packet. All person(s) in the home over the age of 18 must complete a criminal background check.
- g. The applicant(s) and Partners understand that because each party has entered into this agreement voluntarily, either party may terminate this agreement and the adoption process by giving written and/or verbal notice to the other party.
- h. I understand that in the course of the adoption process certain documents and

information, considered to be confidential, may be made available to persons for specific purposes related to the adoption process. I authorize Partners to release such information, as deemed necessary.

i. I understand I must provide complete and honest information to Partners so that they can fulfill their legal responsibility to investigate my feasibility as an adoptive parent. I understand that Partners can terminate my contract and that I will forfeit any payments already made to Partners up to the date of termination if I withhold information or provide incorrect information to the agency.

Examples of omissions or misrepresentations which might prompt the agency to terminate the contract are: withholding information or providing incorrect information relating to an arrest or the alleged commission of a felony, or any criminal record arising out of an arrest (this includes failure to disclose a criminal offense under the First Offender's Act); withholding or providing incorrect information concerning the applicant's biographical, social-economic, or medical histories.

I understand that it is my responsibility to inform Partners within 48 hours at any time during the home study process if my circumstances change. Examples might include, but are not limited to, the following: an arrest or alleged commission of a felony, significant changes in employment or health situations, move, etc.

AAA PARTNERS IN ADOPTION, INC.

- a. Partners will conduct and complete an Adoptive Home Study Evaluation.
- b. Partners will complete the accompanying reports for the file, the State of Georgia, and/or cooperating agency, etc., and the necessary paperwork for the finalization of the adoption.
- c. The undersigned acknowledge that just because Partners may undertake a home study evaluation at their express request and may also undertake one or more post-placement visits at their request, Partners is not the legal custodian or guardian of the child to be placed unless the surrenders of parental rights run expressly in favor of Partners. As a consequence, in those instances when Partners is not the legal custodian or guardian of the child, Partners has no independent right or responsibility to take custody of a child placed with the prospective adopting parents for adoption simply by virtue of its performance of the aforementioned services.
- d. For and in consideration of the services rendered by Partners to the applicants herein, the applicants hereby release and forever discharge and by these presents do for themselves, their heirs, executors, administrators, successors, and assigns may and all claims arising out of Partners' performance of said services, and

further agree to indemnify and hold harmless Partners from any and all claims arising there from.

e. The undersigned acknowledge that as part of the services rendered by Partners in the preparation of a home study or in providing post-placement visits Partners may express opinions concerning Partners' understanding of its obligations under the law as a licensed child-placing agency in the State of Georgia, which may also include an expression of opinions concerning surrenders of parental rights and the finalization of adoption in the State of Georgia. The undersigned acknowledges that these expressions of opinion do not amount to providing legal advice, or legal opinion, nor does it constitute the practice of law in the State of Georgia. The undersigned will consult an attorney-at-law should they require legal advice as to adoption law in general or their rights and remedies in particular under Georgia or any other state's law.

Applicant

Date

Applicant

Date

AAA Partners in Adoption, Inc. (Partners)
Representative

Date