## SUGGESTED FORMAT for WAIVER OF FULL NAME & ADDRESS in a Parental Placement Adoption

PURPOSE: The forms entitled, "Waiver of Identifying Information Form" are to be used to acknowledge that the birth parents and the adoptive parents agree to waive the disclosure of full names and addresses. The birth parent is to complete one form which is entitled Waiver of Full Names & Address Form (Birth Parent). The adoptive parent is to complete a separate form which is entitled Waiver of Full Names & Address Form (Adoptive Parent).

USE: The forms must be completed when the birth parents and adoptive parents elected to waive disclosure of full names and addresses.

A copy of the completed forms is kept in the agency's file. Upon request, the agency is required to make available at any time a copy of the document to any party who signed the document. Another copy of the forms should be sent to the Permanency Unit upon finalization of the adoption.

COPIES: Except for the initial form which is filled out, dated and signed by the birth parent(s), the adoptive parents and the agency worker, all other forms which pertain to the birth parents are separate forms and a copy must be filled out by the birth mother, birth father, and legal father (if different from the birth father). If the mother was married at the time of the child's conception or birth, but her husband is not the child's birth father, he would be considered the legal father for the purpose of these forms.

INSTRUCTIONS FOR COMPLETING THE FORM: The birth and adoptive parents should be asked to complete the form if the birth parent and adoptive parent agree to waive disclosure of full names and addresses. In order to insure that forms are legible, it should be requested that information be typed or printed. The forms should then be shared between the birth and adoptive parents.

The birth and adoptive parents must sign and date the form separately. Each parent should complete their respective form. The agency worker should also sign and date the initial form where indicated and list the name of the agency.

In those instances where the child is not yet born when the birth and adoptive parents complete the forms, the agency worker will need to fill in the child's original name and birth date later on. This information is very important for filing purposes.

## SUGGESTED FORMAT FOR WAIVER OF FULL NAME & ADDRESS FORM (Birth Parent)

l,		_, birth parent of said child
agree to waive the disc	losure of fu	ull names and address consistent with
§ 63.2-1232(3) Code of	f Virginia.	
I,		_, birth parent of said child
agree to waive the disc	losure of fu	ull names and address consistent with
§ 63.2-1232(3) Code of	f Virginia.	
Signed:		
Birth Parent	Date	_
Birth Parent	Date	_
Witness	Date	_
Name of Agency		

## SUGGESTED FORMAT FOR WAIVER OF FULL NAME & ADDRESS FORM (Adoptive Parent)

I,	, adoptive parent of said child
agree to waive the disc	losure of full names and address consistent with
§ 63.2-1232(3) Code of	f Virginia.
I,	, adoptive parent of said child
agree to waive the disc	losure of full names and address consistent with
§ 63.2-1232(3) Code of	f Virginia.
Signed:	
Adoptive Parent	Date
Adoptive Parent	 Date
Witness	Date
Name of Agency	