## **ADOPTION PROMOTION DATA FORM**

NAME OF COUNTY/AGENCY	NAME OF PRE	PARER	<u> </u>			P	REPA	ARER	'S TEL	EPHO	NE		PREPARER'S EMAIL		
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								<u>,                                     </u>					WAS CHILD INCLUDED	WAS CHILD	
CHILD'S INFORMATION			SIS IDENTIFICATION NUMBER										IN SPECIAL CHILDREN	INCLUDED IN	DATE OF
CHIES S IN CHINATION													ADOPTION FUND	ADOPTION	DECREE OF
NAME	RACE	AGE											CONTRACT?	PROMOTION	ADOPTION
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**CERTIFICATION:** I certify that the above adoption services were provided in compliance with Special Children Adoption Fund or Adoption Promotion guidelines and have been documented as required.

Signature of Authorized Official:	Print Name:	
Title:	D	ate:

## INSTRUCTIONS FOR COMPLETING ADOPTION PROMOTION FORM

County/Agency	Enter the name of the county department of social services or private agency.				
Preparer	Enter the name of the individual preparing the Adoption Promotion Form.				
Preparer's Telephone Number	Enter the area code and telephone number of the individual preparing the Adoption Promotion Form.				
Preparer's Email Address	Enter the email address of the individual preparing the Adoption Promotion Form.				
Name	Enter the adoptive name of the child for whom you are requesting payment.				
Age	Enter the age of the child for whom you are requesting payment.				
Race	Enter one of following codes: <b>AI</b> – American Indian; <b>AN</b> – Alaskan Native; <b>A</b> – Asian; <b>AA</b> - African; <b>NH</b> – Native Hawaiian or Pacific Islander; <b>W</b> – White; <b>U</b> - Unable to Determine				
SIS Identification Number	Enter the child's SIS identification number from the DSS-5095.				
Adoption Promotion Contract	Enter "YES", if you have received payment for this child under an Adoption Promotion contract.  Enter "NO", if you have not received any payment under another State Adoption Promotion contract for this child. * For the purposes of this letter, only children for whom the agency has not received payment under the Adoptions Promotion should be captured.				
Special Children Adoption Fund Contract	Enter "YES", if you have received payment for this child under a Special Children Adoption Fund contract. Enter "NO", if you have not received any payment under a Special Children Adoption Fund contract for this child.				
Date of the Decree of Adoption	Enter the date the Decree of Adoption (DSS-1814) was filed.				