	National Authority for Child Care	Doc. Code	NACC-PLAS-F-2022-001
	POST LEGAL ADOPTION SERVICES-CLIENT IDENTIFICATION FORM	Revision No.	0

A. Adoptee Personal Information

First Name:	
Middle Name:	
Surname:	
Date of Birth:	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:	
Email address:	
Home Phone/ Cell Phone:	

Are you a/an: (please choose one)

- Adoptee (18 years & older)
- Adoptive parent/s
- Birth parent/s
- Birth sibling of an adoptee
- Spouse of an adoptee
- Other, please specify relationship to the adoptee _____

B. Please tick-off if the adoption was processed on the following:

- Local/Domestic Adoption in the Philippine Court** (Please provide a copy of the Adoption Decree, Certificate of Finality, Child Study Report, Birth Certificate, etc.).
- Intercountry Adoption (ICA) via NACC** (formerly ICAB) (if ICA, please fill-in the information below).


Adoptee's Full Name <u>prior</u> to Adoption:	
Adoptee's Full Name <u>after</u> Adoption:	
Date of Adoption Decree Issued:	
Adoptee's Date of Birth (mm/day/year):	
Full Name(s) of Adoptive Parents:	
Central Authority/Foreign Adoption Agency & Country:	
DSWD/Child Caring Agency:	

C. Service(s) requested: (please choose the services applicable)

- Search for Birth family
- Homeland/Motherland Visit
- Retrieval of adoption documents/information
- Amendment of Philippine Birth Certificate (Philippine Statistics Authority copy)
- Other, please specify the request:

Name & Signature

Date Signed

	National Authority for Child Care	Doc. Code	NACC-PLAS-F-2022-001
	POST LEGAL ADOPTION SERVICES- CLIENT IDENTIFICATION FORM	Revision No.	0

PARENTAL PERMISSION

(Please fill up if requesting for Birth Family Search)

I/ We am/ are aware that an adopted person under 18 years of age must have the written consent of the adoptive parents in order to receive information regarding his/her birth family.

I/We do hereby give my/our permission for (full name of the adoptee) _____, who is _____ of age, to receive information. Attached is a copy of my/our valid ID(s).

Name & Signature of Adoptive Father


Date Signed

Name & Signature of Adoptive Mother

Date Signed

CONTROLLED COPY

NACC


 DEC 20 2023