ON THE PHILIPPING

National Authority for Child Care

POST LEGAL ADOPTION SERVICES-CLIENT IDENTIFICATION FORM

Doc.	NACC-PLAS-F-					
Code	2022-001					
Revision No.	0					

A. Adoptee Personal Information

Middle Name: Surname: Date of Birth: Gender: Male Female Address: Email address: Home Phone/ Cell Phone: Are you a/an: (please choose one) Adoptee (18 years & older) 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 Intercountry Adoption in the Philippine Court (Please provide a copy Adoption Decree, Certificate of Finality, Child Study Report, Birth Certificate, etc. Intercountry Adoption (ICA) via NACC (formerly ICAB) (if ICA, please fill-information below). Adoptee's Full Name prior to Adoption: Adoptee's Full Name after 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 DAmendment of Phillippine Birth Certificate (Phillippine Statistics Authority copy) Other, please specify the request:		1				
Surname: Date of Birth: Gender: Male	First Name:					
Date of Birth: Gender:						
Gender: Male Female Address: Email address: Home Phone/ Cell Phone: Are you a/an: (please choose one) Adoptive parent/s Birth parent/s Birth parent/s Birth sibling of an adoptee Other, please specify relationship to the adoptee Cother, please specify relationship to the adoptee Description of the adoption was processed on the following: Local/Domestic Adoption in the Philippine Court (Please provide a copy Adoption Decree, Certificate of Finality, Child Study Report, Birth Certificate, etc. Intercountry Adoption (ICA) via NACC (formerly ICAB) (if ICA, please fill-information below). Adoptee's Full Name after Adoption: Adoptee's Full Name after 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 DAmendment of Philippine Birth Certificate (Philippine Statistics Authority copy) Other, please specify the request:						
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PARENTAL PERMISSION

(Please fill up if requesting for Birth Family Search)

					er to receive		•	_			
I/We	do	hereby	give	my/our	permission	for	(full	name	of	the	adoptee)
								who is			of age, to
receiv	e info	rmation.	Attache	ed is a cop	y of my/our	valid 1	D(s).				
	Name & Signature of Adoptive Father					-	Date Signed				
						_					
	Name & Signature of Adoptive Mother			Date Signed							

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