

Name, Address & Phone Number
(If Attorney filing, type Name, Address & Phone Number)

Petitioner(s), Pro Se
 Attorney for Petitioner(s)

IN THE FAMILY COURT OF THE SECOND CIRCUIT
STATE OF HAWAII

In the Matter of Adoption of _____) FC-A NO. _____
A MALE FEMALE)
Born on: _____) ADOPTION FLAG SHEET
A MALE FEMALE)
Born on: _____)
A MALE FEMALE)
Born on: _____)
A MALE FEMALE)
Born on: _____)
by _____)
_____)
 the legal spouse of and _____)
_____)
 the child(ren)'s legal parent _____)
 husband and wife civil union partners _____)
 an unmarried person _____)
_____)
Petitioner(s) _____)

ADOPTION FLAG SHEET

I. Type of Adoption: *("x" all that apply)*
 Consent Non-Consent
 Step-Parent Relative _____
(Relationship to the Child)
 Agency _____
(Name of Agency)

II. Consent(s) have been obtained from the following person(s)/agency:
(“x” all that apply)

<input type="checkbox"/> Mother	<input type="checkbox"/> Legal Guardian(s)
<input type="checkbox"/> Natural and Legal Father	<input type="checkbox"/> Legal Custodian
<input type="checkbox"/> Natural/Adjudicated Father	<input type="checkbox"/> Agency:_____
<input type="checkbox"/> Legal Only Father	<input type="checkbox"/> Child(ren) 10 years old and over
<input type="checkbox"/> Other:_____	

III. Consent(s) have **not** been obtained from the following person(s)/agency:
(“x” all that apply)

<input type="checkbox"/> Mother	<input type="checkbox"/> Legal Guardian(s)
<input type="checkbox"/> Natural and Legal Father	<input type="checkbox"/> Legal Custodian
<input type="checkbox"/> Natural/Adjudicated Father	<input type="checkbox"/> Agency:_____
<input type="checkbox"/> Legal Only Father	<input type="checkbox"/> Child(ren) 10 years old and over
<input type="checkbox"/> Other:_____	

IV. Consent(s) of person(s) in paragraph III may be dispensed with and is not required because:

V. The following exhibits/documents have been filed:

- Certified copy of each child’s birth certificate
- Petitioner’s marriage certificate
- Marriage certificate of adult adoptee
- Death certificate of child(ren)’s Mother Father
- Divorce Decree for male petitioner female petitioner
- Order Appointing Legal Custodian or Guardian of child(ren)
- Paternity Judgment for child(ren)
- Certified copy of Order Awarding Permanent Custody
- Affidavit of Birth Background
- Foreign Adoption Placement Agency’s Affidavit
- Medical Certificate for each child
- Statement of Mailing of Notice to DHS

VI. Have any foreign language documents been translated into English?
 YES NO

- VII. The following documents have been given to the adoption clerk:
 DOH Medical Information form; Birth Parent's Consent to Release of Information
 Mother's medical records of the child(ren)'s birth and Mother's Consent to Release
 Copy of the Adoption Information Sheet
- VIII. List any missing documents, which are required by statute, rule or official memorandum:
- IX. Does Interstate Compact on the Placement of Child(ren) (ICPC) apply?
 YES NO
 If yes, have all requirements of ICPC been met? YES NO
- X. Does the Indian Child Welfare Act (ICWA) apply to this case?
 YES NO
 If yes, have all requirements of ICWA been met? YES NO
- XI. Are you aware of any opposition or object to the Petition?
 YES NO
 If yes, by whom (include relationship to child(ren) and reason by objection, if known):

The undersigned attorney or petitioner pro se hereby certifies that to the best of his or her knowledge and belief, all of the foregoing are true and correct.

DATE

SIGNATURE OF ATTORNEY or PETITIONER PRO SE

Americans with Disabilities Act Notice



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.