

In Re: The Adoption of:

**REQUEST FOR ADOPTION
RECORD**

_____ (name of person adopted)

Case No.: _____

Date of Birth: _____

1. I am the _____ (relationship) of _____ (person adopted)
2. He/she was adopted on _____ in Douglas County, Wisconsin.
3. I am requesting _____ (how many?) certified copy/copies of the Order for Adoption for the following reason:

_____ Social Security Administration

_____ Update school records

_____ Update medical records

_____ Other _____

Dated: _____

Signature

Name printed/typed

Address

Telephone number

COURT OFFICIAL USE ONLY

Request for certified copy of Order for Adoption is: Approved _____ Denied _____

Dated: _____

Circuit Court Judge

PROBATE OFFICE:

Identification verified: _____ (D.L.) _____ (Other)

Certified copy delivered to: _____

Date: _____ By : _____ (Register/Deputy)