

<input type="checkbox"/> District Court <input type="checkbox"/> Juvenile Court _____ County, Colorado Court Address: _____		▲ COURT USE ONLY ▲
In the Matter of the Adoption of: _____ Birth Name of Adoptee (If known) _____ Current Legal Name of Adoptee		
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____		
		Case Number: _____ Division _____ Courtroom _____
REQUEST FOR ACCESS TO ADOPTION RECORDS		

I, _____, (name) request access to all adoption records, as defined by C.R.S. § 19-1-103(7), in the court's possession, that may include:

- the adoptee's original and amended birth certificate,
- the Final Decree of Adoption,
- the Final Order of Relinquishment,
- the Order of Termination of Parental Rights,
- non-identifying information about the birth parents and adoptee, and
- identifying information about the birth parents and adoptee.

1. Information about the person making the request (Requestor):

Name: _____ Date of Birth: _____
 Relationship to Adoptee: _____
 Street Address: _____
 Mailing Address, if different: _____
 City: _____ State: _____ Zip Code: _____ Daytime Phone #: _____
 Email Address: _____ Evening Phone #: _____

2. Information regarding the Adoption:

Name of Adoptive Parent(s): _____
 Date of Adoption (on or about): _____ County of Adoption: _____
 Adoptee's Date of Birth: _____

3. I am eligible to have access to the adoption records in this case because I am:

- a. ☐ The adult adoptee OR ☐ His/her legal representative
- b. ☐ An adoptive parent of the minor adoptee OR ☐ His/her legal representative
- c. ☐ A custodial grandparent of the minor adoptee OR ☐ His/her legal representative
- d. ☐ The spouse or partner in a civil union of the adult adoptee OR ☐ His/her legal representative
AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased

- e. ☐ An adult descendant of the adoptee OR ☐ His/her legal representative
AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
- f. ☐ An adult sibling or half-sibling of the adult adoptee OR ☐ His/her legal representative
AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
- g. ☐ An adoptive parent or grandparent of an adult adoptee OR ☐ His/her legal representative
AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
- h. ☐ A confidential intermediary **and** I have attached a copy of the certified order.

NOTE: You will be **required** to provide proof of your identity and establish your relationship to the adoptee to receive adoption records pursuant to sections 19-5-305(2)(b)(I) and(IV), C.R.S. Ask the court for more details or [click here](#) for a list of acceptable forms of identification and documents to establish how you are related to the adoptee. If you are submitting your request by mail, please send copies of these documents to the court for review (do not send originals). The court will destroy the copies after the information has been reviewed. If you send originals, you will be responsible for the cost of returning the originals to you by certified mail restricted delivery to ensure that the documents are delivered only to you.

4. ☐ I am not one of the individuals listed above in number 3 or do not have the required proof, however, good cause exists to allow me to have access to the adoption records pursuant to section 19-1-309, C.R.S. (explain below). **Note:** If you checked this box, file the Order ([JDF 533](#)) with the Court.

5. ☐ The provisions of the Indian Child Welfare Act apply to the adoptee as follows:

6. When the court locates the adoption records that I am requesting, I request:

☐ That the court mail the records to me by certified mail restricted delivery (you will be responsible for the cost of mailing);

OR

☐ That the court notify me when the records are available, and I will come to the court in person to inspect and/or copy the records (you will be responsible for any copying costs).

VERIFICATION AND ACKNOWLEDGEMENT

I swear/affirm under oath that I have read the foregoing Request and that the statements set forth therein are true and correct to the best of my knowledge.

(Printed name of Requestor)

Signature of Requestor

Signed and sworn to before me by _____ in the County of _____

_____, State of _____, this _____, day of _____, 20 _____.

My Commission Expires: _____

Deputy Clerk/Notary Public

FOR CLERK USE ONLY BELOW THIS LINE (check the boxes below)

The requesting party has presented:

☐ Identification provided: _____

AND

☐ Documentation establishing his/her relationship to the adoptee provided:

If the request was received by mail:

☐ Copies of the documents described above received from the requestor proving identify and establishing his/her relationship to the adoptee were reviewed and destroyed on _____(date). If originals of the documents described above were received from Requestor, the originals were returned to the Requestor by certified mail restricted delivery on _____(date).

☐ The certified mail receipt was received by the court on _____(date).

Tracking number: _____. **NOTE:** After the receipt is received and the tracking number is noted on the form, destroy the receipt.

Clerk Signature

Date