

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____  <hr/> <b>In the Matter of the Petition of:</b> _____ (name of person(s) seeking to adopt) <b>For Validation of a Foreign Decree of Adoption</b>	<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____  Division _____ Courtroom _____
<b>PETITION FOR VALIDATION OF FOREIGN DECREE OF ADOPTION</b>	

The Petitioner(s) being desirous of validating a foreign decree of adoption, so as to make said child for all intents and purposes the legal child of Petitioner(s), state(s) the following facts:

**Information about the Petitioner(s):**

**Petitioner #1:** \_\_\_\_\_ **(Full Name)** Occupation: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City & Zip: \_\_\_\_\_ Length of Residence in Colorado: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Place of residence at the time of birth of the child.

\_\_\_\_\_  
Street Address City State Zip Code

**Petitioner #2:** \_\_\_\_\_ **(Full Name)** Occupation: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City & Zip: \_\_\_\_\_ Length of Residence in Colorado: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Place of residence at the time of birth of the child.

\_\_\_\_\_  
Street Address City State Zip Code

If applicable, maiden name of adopting mother: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

I/We am/are a citizen of the United States of America and resident(s) of the State of Colorado.

Identify all children of the Petitioner(s) (both natural and adopted and both living and deceased).

Full Name of Child	Full Name of Child

**Facts concerning the child to be adopted.** (Attach copy of Adoption Decree.)

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Adoption: \_\_\_\_\_

Place of Residence: \_\_\_\_\_

City/Province and Country of Adoption: \_\_\_\_\_

Said child has been in the care and custody of Petitioner(s) since \_\_\_\_\_

Wherefore, the Petitioner(s) pray(s) that a Decree Validating Foreign Adoption be entered herein declaring said child to be the child of Petitioner(s) and that the name of said child be changed to:

\_\_\_\_\_ (full name) and that said child shall be entitled to all of the rights and privileges and be subject to all of the obligations now conferred and imposed by law.

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### VERIFICATION

**I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.**

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_  
(date) (month) (year) (city or other location, and state OR country)

\_\_\_\_\_  
(Printed name of Petitioner)

\_\_\_\_\_  
Signature of Petitioner

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### VERIFICATION

**I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.**

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_  
(date) (month) (year) (city or other location, and state OR country)

\_\_\_\_\_  
(Printed name of Co-Petitioner)

\_\_\_\_\_  
Signature of Co-Petitioner