



- any crime involving violence, rape, sexual assault, or homicide on \_\_\_\_\_ (date).  
 Felony  Misdemeanor
- any felony involving physical assault or battery on \_\_\_\_\_ (date).  
 Felony  Misdemeanor
- any felony drug-related conviction within the past five years, at a minimum on \_\_\_\_\_ (date).  
 Felony  Misdemeanor

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

Full Name of Child	Full Name of Child

**Facts concerning the child to be adopted:** (Do not fill in if placement is by an agency or Department of Social Services.)

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

Place of Birth: \_\_\_\_\_ Relationship of child to Petitioner, if any: \_\_\_\_\_

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

**Regarding the Indian Child Welfare Act (ICWA):**

- I am aware of the child or child’s relatives having American Indian/Native American or Alaska Native ancestry.

Name of tribe(s) \_\_\_\_\_

**Note:** If you checked that you are “aware” of the child or child’s relatives having any American Indian/Native American or Alaska Native ancestry, you must complete and file with the court, JDF 1350 – Indian Child Welfare Act (ICWA) Assessment Form.

- I am not aware of the child or child’s relatives having any American Indian/Native American or Alaska Native ancestry.
- Notice of this Petition has been provided to the parent or Indian custodian of the child and to the tribal agent of the tribe, as required by §19-1-126(1)(c), C.R.S.

- Reasonable efforts have been made to send notice to the identified persons as follows:

\_\_\_\_\_  
\_\_\_\_\_

have not been returned at the time of filing, the postal receipts or copies shall be filed with the Court within 10 days of the filing of this Petition. § 19-1-126(1)(c) C.R.S.

- If applicable, inquiries have been made by the County Department of Social Services or child placement agency to determine whether the child is an Indian child as follows:

\_\_\_\_\_  
\_\_\_\_\_

Full description of the property of said child, if any: \_\_\_\_\_

Name and address of the Guardian(s) of the child and estate of said child if any have been appointed:

\_\_\_\_\_

Name of the agency, if any, to which custody of the child has been given by proper order of the Court:

\_\_\_\_\_

The child has been in the care and custody of the Petitioner since \_\_\_\_\_ (date).  
The legal custody of said child is with \_\_\_\_\_ (name).

**Information about the Birth Parents of the Child:**

Full name of birth father: \_\_\_\_\_

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

Full name of birth mother: \_\_\_\_\_

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

The written consent of the custodial birth parent  is or  is not attached.

The written consent of the non-custodial birth parent  is or  is not attached.

The child will not be the subject of a pending dependency and neglect action when the adoption is heard.

If parental rights are relinquished, are terminated, or are being terminated in this action pursuant to §§19-5-101 – 108, C.R.S., as amended, or parent is deceased, state details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Wherefore, Petitioner pray that a Decree of Adoption be entered herein declaring said child to be the child of Petitioner 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.

- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
- By checking this box, I am acknowledging that I have made a change to the original content of this form.

**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)

\_\_\_\_\_  
Petitioner Name

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

\_\_\_\_\_  
Attorney Signature (If any)