

**ADOPTION FILE CHECKLIST**

**Case name:** \_\_\_\_\_ **Case No:** \_\_\_\_\_ **Attorney:** \_\_\_\_\_

**INITIAL FILING:**

Pro se: forms from internet/agency/packet  
Stepparent guideline to petitioner on:

\_\_\_\_\_ Petition for Adoption State of birth: \_\_\_\_\_

\_\_\_\_\_ Order and Notice for Hearing

Hearing Date/time: \_\_\_\_\_

Faxed to DHS on: \_\_\_\_\_ (step parent adoptions only)

\_\_\_\_\_ Agency Report

\_\_\_\_\_ Consent to Adoption by natural, non-terminating parent

\_\_\_\_\_ Consent to Adoption by child over 14 years

\_\_\_\_\_ TPR information:

County TPR case no: \_\_\_\_\_ or other county/state: \_\_\_\_\_

\_\_\_\_\_ Certified copy of birth certificate, if required

\_\_\_\_\_ Foreign birth information

\_\_\_\_\_ Other:

**POST ADOPTION HEARING:**

\_\_\_\_\_ Order for Adoption

\_\_\_\_\_ Report of Adoption

Mailed to Vital Records \_\_\_\_\_

(Original Report of Adoption, \$\$, and copy of Order for Adoption to Vital Records)

**NOTE:** If child was not born in Wisconsin: Report of Adoption for the birth state and Order for Adoption sent to attorney/adoptive parents on:  
OR Sent to vital records of birth state on:

**FOREIGN** original Report of Adoption, copy of Order for Adoption, and copy of any birth country  
**ADOPTION:** documents sent to Vital Records on:

\_\_\_\_\_ Record of Adoption

Mailed to Social Worker/State DHFS/agency on: