Private Agency and Independent Adoption Disruption/Dissolution Report

Date:   /   /
Reporting Agency/Party: ________________________________

☐ DISRUPTION (prior to finalization) ☐ DISSOLUTION (after finalization)

INFORMATION:

Country of Origin: ______________________________________
Child’s Current Residence: (Name of State) ______________________
Adoption Finalization: (Name of State) ______________________
Year of Finalization: ____________________________
Was Child Ever in DHS Custody? ☐ Yes ☐ No
Age of Child: ____________________________
Gender of Child: ☐ Male ☐ Female
Year of Child’s Placement: ____________________________
Adoption Agency that Handled Placement: ______________________
Year of Disruption or Dissolution: ____________________________

Reason(s) for Disruption or Dissolution: ______________________

Resolution of Disruption or Dissolution: (Permanency Plan)

Comments: ______________________________

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DHS 0181 (6/07)
Page 1 of 1