Request for Information from Adoption File

Please provide as much of the following as is available to you. This will assist the Clerk of the Court in determining if your adoption was filed in St. Clair County, Illinois and what information can be released to you.

Adoptee Information

Current Name		Current Address	
Adopted Name			
Birth Name		Daytime Telephone Number	
Date of Birth	Place of Birth	Adoption Case Number	Date of Adoption

Adoptive Parent Information

Name of Adoptive Father		Name of Adoptive Mother	
Date of Birth	Date of Death	Date of Birth	Date of Death
Current Address		Current Address	
Daytime Telephone Number		Daytime Telephone Number	

Birth Family Information

Name of Birth Father	Name of Birth Mother
Current Address	Current Address
Daytime Telephone Number	Daytime Telephone Number

Request for Release of Information

My involvement in this is: ☐ I am the adoptee ☐ I am an adoptive parent ☐ I am a birth parent ☐ Other:	I request the release of the following: ☐ Copy of court file ☐ A certified copy of the Judgment of Adoption ☐ A copy of the Order Terminating Parental Rights ☐ A copy of adoptee's original birth certificate ☐ Other:

Reason for Requesting Release of Information

A photocopy of your government issued photo ID must be attached. Other documentation may be required.	Date	Signature

FOR USE BY COURT

Date Received	[ ] No file in this Court [ ] Court Appearance Required [ ] Special GAL Appointed	Notes