



**Adoptive Family
Information Non-Identifying Sheet**
To be shared with Expectant Mother's to help
them know you better.

Adoptive Parent #1

First Name _____ Age _____
Height _____ Weight _____ Color of Eyes _____ Color of Hair _____
Educational Background _____
Occupation _____ Health _____
Hobbies _____
Ethnic or Racial Background _____
Religion _____
Activity in Your Church and Community _____
Describe Your Marriage _____
Describe Your Partner _____
Parenting Style _____
Hopes and Dreams for Your Child _____
Personality Traits _____

Adoptive Parent #2

First Name _____ Age _____
Height _____ Weight _____ Color of Eyes _____ Color of Hair _____
Educational Background _____
Occupation _____ Health _____
Hobbies _____
Ethnic or Racial Background _____
Religion _____
Activity in Your Church and Community _____
Describe Your Marriage _____
Describe Your Partner _____
Parenting Style _____
Hopes and Dreams for Your Child _____
Personality Traits _____

Both

Plans for Child Care _____
Relationship with Extended Family _____
What Part of the Country Do You Live In? _____
Degree of Openness Desired in Your Adoption _____

Children In Your Family

First Name _____ Gender _____ Age _____
Biological or Adopted _____ Race _____
Hair Color _____ Eye Color _____ Complexion _____

First Name _____ Gender _____ Age _____
Biological or Adopted _____ Race _____
Hair Color _____ Eye Color _____ Complexion _____

First Name _____ Gender _____ Age _____
Biological or Adopted _____ Race _____
Hair Color _____ Eye Color _____ Complexion _____

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