STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

_____
Name

_____
Date of Birth

Petition for an Order for Registration of a Foreign Adoption Order

Case No. _____

UNDER OATH:

I/We petition the court for an Order Registering a Foreign Adoption Order, and state:

1. I/We, [Name(s)] _____, am an adoptive parent of the child.
   My address is: _____.
   My telephone number is: _____.
2. The child was admitted to the United States with an IR-3 or IH-3 visa issued by the U.S. citizenship and immigration services.
3. The child was admitted to the United States on [Date] _____.
4. All of the following requirements have been met:
   A. A home study was completed as required or recognized by this state and the home study recommends me as an adoptive parent;
   B. The required preadoption training has been completed; and
   C. I am receiving and will receive supervision from a licensed child welfare agency in the United States until the court enters an order registering the foreign adoption order and I have satisfied all preadoption training requirements.
5. The following information is attached:
   A. Evidence as to the date, place of birth, and parentage of the child;
   B. A certified or notarized copy of the final order of adoption entered by a court of the foreign jurisdiction and, if that final order is not in English, a certified translation or notarized copy of a certified translation of that final order; and
   C. Any other information necessary for the state registrar to prepare a certification of birth data for the child.

☐ 6. I/we request that the name of the child be changed to
[First] _____ [Middle] _____ [Last] _____.

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

▶ _____
Petitioner's Signature

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

▶ _____
Petitioner's Signature

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)

DISTRIBUTION:
1. Court
2. Adoptive Parent(s)
3. Parent(s)' Attorney(s)