

CRIMINAL CONVICTION/ARREST HISTORY STATEMENT

Each person seeking to adopt/have a child placed in his or her home for permanency MUST execute a criminal arrest statement. Please read this document very carefully before you sign the form. This form MUST be signed in front of a Notary Public. This form will be made part of the Interstate Compact for Placement of Children and/or the Intercountry Adoption Program.

ADOPTIVE APPLICANT INFORMATION

Name: _____

Address: _____

City, State, Zip _____

Social Security Number: _____

Driver's License Number: _____

I _____ hereby state that I have not been charged or convicted of any crime, other than a minor traffic violation. I have never been charged or convicted of child abuse or neglect. I have not been charged or convicted of any offense by (1) any court in any state of the United States, (2) any Federal Court of the United States, or (3) any Court in any foreign country. Additionally, I state there are no charges pending against me for any allegation of a commission of a criminal act. I further state that my driver's license has never been revoked or suspended.

Do you have a history of the following?

Been Arrested	Yes	No
Been involved with any allegations related to Domestic Abuse/Violence	Yes	No
Had your parental rights terminated	Yes	No
Been rejected as a prospective Adoptive parent	Yes	No

If any of the answers to the above questions are yes, please provide a brief explanation along with the following information:

Arrest _____ **Year** _____

Conviction _____ **Year** _____

Attach additional arrests/convictions to this document
Attach brief explanation(s) to this document

The above individual by signing this document is stating that the information contained in said document is true and correct. The above individual further understands that if any of the above information is found to be false, (even if you believe that the information has been expunged) the application for adoption/ placement for permanency MAY BE denied by Interstate Compact and/or the Intercountry Adoption Coordinator. If authorization for placement has been granted prior to receiving any such information, the above individual understands that the approval MAY BE withdrawn.

Signature of Applicant

Date

Notary Public

State of Illinois

County: _____

Date: _____

My Commission Expires: _____

Seal