CHECKLIST REGARDING THE WYOMING ADOPTION FORM

Was the child/person being adopted born in Wyoming?
 If yes, please continue. If no, please stop and visit http://www.cdc.gov/nchs/w2w.htm for information on the state where the birth occurred.
Are all items answered?
Did you provide the child's full name prior to adoption? We recommend providing the name as it currently appears on the birth certificate.
Is the place and date of birth completed?
Did you provide the Full Name of the Child as it should appear on the birth certificate, Part II?
Be sure to review the information entered, print the document and ensure it is signed by all appropriate parties.
Forward the original Report of Adoption document to Vital Statistics Services along with a Certified Copy of the Final Decree. Interlocutory decrees are not acceptable.

STATE OF WYOMING REPORT OF ADOPTION

Parts I and II of this report should be filled out by the petitioner or the attorney for the petitioner. When the final order of adoption has been entered, the Clerk of Court shall fill out Part III and affix the court seal. All the information stated in the final decree of adoption must be in agreement with the information that is on the original birth certificate.

Each report must be accompanied by the certified copy of the final decree of adoption. Certified copies must be signed by the Clerk of Court and bear the raised court seal. Interlocutory decrees are not acceptable.

If the child was born in Wyoming, mail the completed report, the certified copy of the decree and a filing fee of \$21.00, to cover the cost of filing the new certificate and one certified copy of the new certificate to: Vital Records Services, Hathaway Building, Cheyenne, WY 82002. Additional certified copies are \$13.00 each. A legible photocopy of the identification of the individual signing this form must be presented in order that the certified copy of the substituted birth certificate can be mailed to them.

If the child was not born in Wyoming, send this report and the certified copy of the decree to the vital records office in the state of birth. You should then be contacted by that office.

PART I - INFO	DRMATION ABOUT THE CHILD BEFORE ADOPT	ION		
Name of Child	Prior to Adoption		Sex	
Date of Birth Place of Birth		Name of Ho	Name of Hospital	
Maiden Name	of Natural Mother			
Name of Natu	ral Father			
PART II - INF	ORMATION AFTER ADOPTION			
Name of Child	Following Adoption		•	
FATHER Check One Adoptive Natural	ne Name Date of Birth			
MOTHER Check One Adoptive Natural	One Maiden Name			
	Street Address			
•	County			
	Inside City Limits?YesNo			
Signature of Ir	nformant	Petitioner	Attorney for Petitioner	
•				
	RTIFICATION OF THE CLERK OF THE COURT			
I hereby certify	y that the Final Order of Adoption was entered on _	an	d was numbered	
According to the	he court records, the child's name prior to adoption		•	
_	ne Clerk of Court	•,	(SEAL)	
Name of the D	istrict Court			