AFFIDAVIT FOR ADOPTION SERVICES

This affidavit is being submitted for the purpose of continuing an adoption assistance agreement provided on behalf of_____.
Child's Name

I/We certify that:

(1) I/We are legally responsible for the support of this child;

(2) I/We are providing support for the child; and

(3) _____ :
(Child's Name)

☐ is enrolled and attending school full time at _____ OR
(School Name)

☐ is **not** enrolled and documentation is attached for the child being incapable of attending school or a medical condition prohibiting the child from attending school

It is understood that it is my/our responsibility to notify the agency if any of the above circumstances, which would make the child ineligible for adoption assistance, change. It is further understood that I/We may request changes in the payments and services provided under the adoption assistance agreement, at any time the needs of the child or circumstances of my/our family change.

_____ _____
Adoptive Mother Date

_____ _____
Adoptive Father Date

Subscribed and sworn to before me this _____ day
of _____, 20___.

_____
Notary Public

My Commission expires: _____, 20___.