



EMBASSY OF THE UNITED STATES

ADDIS ABABA • ETHIOPIA



Adoption Agency: _____ Intake Date: _____

Petitioner's name: _____ Case number: _____

Child's name: _____ DOB: _____

Child's place of birth: _____ Orphanage: _____

If child was relinquished, the relationship to child of person who relinquished (mother, uncle, etc): _____

Please note if birth mother, birth father, or both birth parents are deceased _____

If child was found abandoned, list who found the child, when, and where: _____

_____ Child's full name and date of birth on the birth certificate matches the information on the passport

_____ DS-230 form is complete with all questions answered, including Child's full name and DOB

_____ Child's name, gender and court date are listed correctly on MOWA letter

_____ Adoption contract specifies child's information correctly _____ Adoption contract translation is accurate

_____ Court decision document specifies child's information correctly _____ Court decision translation is accurate

_____ Names of the PAPs are spelled correctly on contract, MOWA, court decree and child's BC

IR3/IR4 (Circle One) Did both PAPs meet the child at time of court?

_____ If abandoned, police report submitted with translation

_____ Evidence of efforts made to locate birth parents of an abandoned child/disappeared parent(s)

_____ If relinquished, both kebele documents and death certificate(s) submitted with translation

_____ If relinquished by other, court decree granting legal custody of a child with translation

_____ If mentally ill, medical evaluation done by the specialist

_____ Does the information from the kebele documents match the First Instance Court decree?

_____ A signed I-600 petition by the prospective adoptive parent(s) is submitted

_____ Copies of the Privacy Act Waiver is submitted _____ Copy of the parents' passports with the Ethiopian visa

_____ Medical completion slip _____ Printed copy of Visa 37 approval confirmation email

_____ Payment of all fees including the \$404 immigrant visa application fee is completed.

Screener _____

Agency Signature: _____