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**NEW CLIENT INTAKE – STEP-MOTHER ADOPTION**

PLEASE PROVIDE THE FOLLOWING INFORMATION:

**General Information (Please Print)**

Today's Date: \_\_\_\_\_

Please check one:           Father \_\_\_\_\_           Step-Mother \_\_\_\_\_

Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Email address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DL # \_\_\_\_\_

Birthdate (M/D/Y): \_\_\_\_\_ Age: \_\_\_\_\_ Race/Ethnic background: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_\_

Name of Current Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Gross Salary per month or annually: \_\_\_\_\_

Education: \_\_\_\_\_

Please check one:           Father \_\_\_\_\_           Step-Mother \_\_\_\_\_

Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Email address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DL # \_\_\_\_\_

Birthdate (M/D/Y): \_\_\_\_\_ Age: \_\_\_\_\_ Race/Ethnic background: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_\_

Name of Current Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Gross Salary per month or annually: \_\_\_\_\_

Education: \_\_\_\_\_

Please give the following information on the Biological Mother of the Child:

Name: \_\_\_\_\_

Were you married to the Biological Father: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DL # \_\_\_\_\_

Birthdate (M/D/Y): \_\_\_\_\_ Age: \_\_\_\_\_ Race/Ethnic background: \_\_\_\_\_

Last Known Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_\_

Name of Current Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

The child's biological mother:

- parental rights are terminated.
- has agreed to terminate her parental rights.
- is deceased.

Your Current Marital Status: (check one)

Married      Not Married      Engaged to be married on \_\_\_/\_\_\_/\_\_\_      Single

If married, please give date and place of marriage:

\_\_\_\_\_

Has either parent been married before?    Yes    No

If divorced, please provide the following information:

- a. Name of divorced parent (1): \_\_\_\_\_
- b. Previously married to: \_\_\_\_\_
- c. Date of divorce: \_\_\_\_\_
- d. Grounds for divorce: \_\_\_\_\_

a. Name of divorced parent (2): \_\_\_\_\_

b. Previously married to: \_\_\_\_\_

c. Date of divorce: \_\_\_\_\_

d. Grounds for divorce: \_\_\_\_\_

### Children Who Reside With You

Name	Birthdate / Age	Sex	Biological/Adopted
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Other Members of Household

Name	Birthdate / Age	Sex	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How do you prefer that we contact you? (If different than above.)

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_ Pager: \_\_\_\_\_

How were you referred to Wendi Lester? \_\_\_\_\_

Who will be responsible for your account with us? \_\_\_\_\_

Have you seen another attorney about this matter? \_\_\_ If yes, who? \_\_\_\_\_

Have you contacted an adoption agency? If yes, which agency? \_\_\_\_\_

**Name and phone number** of person, not currently living with you, to contact in case of an emergency: \_\_\_\_\_

# STEP-PARENT ADOPTION INFORMATION FORM

## *Step-mother*

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Father: \_\_\_\_\_  
Step-mother: \_\_\_\_\_

Step-mother

1. Are you currently in the process of a home study? (mark one)    Yes    No

If yes, please provide the following information regarding your social worker:

Name: \_\_\_\_\_

Best method of contact: \_\_\_\_\_

If no, have you contacted a social worker to complete a home study?  
(check one)    Yes    No    Need more information

2. Is your Criminal History record currently on file?

\_\_\_ Yes

\_\_\_ Currently in process

\_\_\_ I have not requested or completed a Criminal History record.

**PLEASE ANSWER THE FOLLOWING QUESTIONS. ANY DISCUSSION RELATING TO ANY OF THESE TOPICS BETWEEN YOU AND YOUR ATTORNEY WILL BE PROTECTED BY THE ATTORNEY-CLIENT PRIVILEGE. IF YOU FAIL TO BE HONEST IN ANSWERING THESE QUESTIONS, IT COULD BE ABSOLUTELY DISASTROUS TO YOUR CASE.**

**Will anyone allege that you or your partner has done any of the following:**

### **STEP-MOTHER**

1. Committed a crime? \_\_\_\_\_

2. Been arrested? \_\_\_\_\_

3. Been in jail or prison? \_\_\_\_\_
  
4. Used illegal drugs? \_\_\_\_\_
  
5. Abused prescription drugs? \_\_\_\_\_
  
6. Abused alcohol? \_\_\_\_\_
  
7. Been arrested for or convicted of driving while under the influence of alcohol (drunk driving)? \_\_\_\_\_
  
8. Attempted suicide? \_\_\_\_\_
  
9. Been hospitalized for an emotional or psychiatric disorder? \_\_\_\_\_
  
10. Suffered from or received treatment for an emotional or psychiatric condition? \_\_\_\_\_
  
11. Abused own spouse/partner? \_\_\_\_\_
  
12. Been accused of child abuse? \_\_\_\_\_
  
13. Had a homosexual/bisexual relationship? \_\_\_\_\_
  
14. Drunk to excess? \_\_\_\_\_  
If so, what and how often? \_\_\_\_\_
  
15. Other? \_\_\_\_\_

If an answer to one of the questions above is "yes," please describe the situation in detail.

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CHILD (A)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
County of residence: \_\_\_\_\_ Age: \_\_\_\_\_

The child's biological mother:

- is unknown.
- has terminated their parental rights.
- has agreed to terminate their parental rights.
- is deceased.

1. Has the child lived in the same home with the step-mother for at least 6 months?  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

2. How long has his/her residence been in Texas? \_\_\_\_\_

3. If the child's mother has not terminated her parental rights, what grounds do you have for termination? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If the child is over 12 years old will they agree to be adopted? (circle one)  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

5. What are the child's feelings regarding the adoption by his/her step-mother?  
\_\_\_\_\_  
\_\_\_\_\_

CHILD (B)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
County of residence: \_\_\_\_\_ Age: \_\_\_\_\_

The child's biological mother:

- is unknown.
- has terminated their parental rights.
- has agreed to terminate their parental rights.
- is deceased.

1. Has the child lived in the same home with the step-mother for at least 6 months?  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

2. How long has his/her residence been in Texas? \_\_\_\_\_

3. If the child's mother has not terminated her parental rights, what grounds do you have for termination? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If the child is over 12 years old will they agree to be adopted? (circle one)  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

5. What are the child's feelings regarding the adoption by his/her step-mother?  
\_\_\_\_\_  
\_\_\_\_\_

CHILD (C)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
County of residence: \_\_\_\_\_ Age: \_\_\_\_\_

The child's biological mother:

- is unknown.
- has terminated their parental rights.
- has agreed to terminate their parental rights.
- is deceased.

1. Has the child lived in the same home with the step-mother for at least 6 months?  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

2. How long has his/her residence been in Texas? \_\_\_\_\_

3. If the child's mother has not terminated her parental rights, what grounds do you have for termination? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If the child is over 12 years old will they agree to be adopted? (circle one)  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No

5. What are the child's feelings regarding the adoption by his/her step-mother?  
\_\_\_\_\_  
\_\_\_\_\_