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A non-profit humanitarian and adoption agency licensed by the state of Wyoming

Home Study Checklist for _____
Home Study Prepared by _____

_____ Social Worker met with the family two separate times in their home
_____ Report is on letterhead, notarized, and copy of license attached

Information about the prospective adoptive parent(s) and family:

_____ identity and eligibility: (birth certificates, marriage certificate, divorce decrees/death certificates)
_____ background, family
_____ medical history including date of most recent medical exam, proof of a TB test
_____ social environment, description of home and area
_____ economic; ability to adopt, income and budget, assets and liabilities
_____ health insurance for the adopted child
_____ feelings of biological children about adoption
_____ guardianship plan
_____ inheritance rights the same for adopted child/ren as for biological
_____ reasons for adoption
_____ ability to undertake an adoption
_____ 5 references (2 family, 3 non-family)
_____ results of the criminal background check both on the parent/s and any other individual for whom a check is required
_____ results of child abuse registry check on parent/s and any other individual for whom a check is required
_____ home safety check list

_____ Each parent answered "no" to questions required:

1. Do you have a history of mental illness?
2. Do have a history of substance abuse?
3. Do have a history of sexual abuse, domestic violence or child abuse?
4. Have you been arrested, convicted or the perpetrators of any crime?
5. Have you been rejected as a prospective adoptive parent or the subject of an unfavorable home study?

Other:

_____ clear and specific statement regarding the characteristics of the child/ren whom parents would be qualified to adopt, in particular if they are willing and able to care for a child with special needs
_____ statement describing counseling and the training provided to the adoptive parent/s
_____ certificate or other proof of 10 hours of approved pre-adoption training, optional
_____ recommendation of the social worker as to the age, gender and number of children he approves family to adopt