



## Madison Adoption Associates

### HOME STUDY GUIDELINES AND CHECKLIST: COLOMBIA

#### **General Guidelines:**

The information outlined in the following checklist must be included in each home study report for Colombia. As the author of the home study, please be sure each of these issues has been thoroughly addressed, has a separate section in your report, and indicate the page number where this information is found. Issues that are not applicable to the adoptive family should be marked with N/A.

Due to Hague requirements, the length of each home study report will vary depending on the family. The guidelines below are meant to provide assistance in writing the report. It is not mandatory to follow this exact structure, as long as all required information is included.

**\*\*One home visit is required for an annual Home Study Update to be approved by MAA.**

### Home Study Report Outline

**Please indicate the page numbers of the home study report where the specific information is stated.**

Page(s):

\_\_\_\_\_ **Section 1: Adoption Study Approval Date**

1. Social Worker Name & License # (*if licensure is applicable*)
2. Name & Contact Information of Home Study Agency
3. Home Study Finalized Date: MM/DD/YYYY
4. Home Study Expiration Date: MM/DD/YYYY

\_\_\_\_\_ **Section 2: Identifying Information**

Complete the following table for each of the applicants:

	Prospective Adoptive Parent 1	Prospective Adoptive Parent 2
Full Legal Name		
Date of Birth		
Telephone Numbers		
Education		
Occupation		
Citizenship		

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Address	
Marriage Date & Place	

### Section 3: Contact Information

State the date(s) you were contacted by the client and identify the relationship between your agency and Madison Adoption Associates.

*Sample:*

The family contacted Home Study Agency on January 22, 2018 for the purpose of an adoption assessment. The international placement agency they have chosen is **Madison Adoption Associates**. Thus, Home Study Agency is an exempt provider for **Madison Adoption Associates** based on an agreement executed in February 2018. In accordance with 22 CFR Part 96, **Madison Adoption Associates** is an accredited agency on file with the U.S. Department of State.

For each interview, specify the date, the length of time, and the names of the participants. A minimum of 4 face-to-face interviews must be conducted. A minimum of 3 separate dates must be listed. This section must include a summary of topics discussed, and educational efforts made by the home study agency to prepare for the international adoption. Each child in the home must be interviewed, and each spouse must be interviewed separately. Children residing outside of the home may be interviewed by telephone.

Meeting Date	Location	Length	Person(s) Interviewed

### Section 4: Child Preferences

- State the number of children the client desires to adopt, the country of adoption, gender preference of the adopted child/children (**please state they are open to either gender**), age range at time of referral and time of homecoming, and any express interest in twins, siblings or special needs. Include all specific special medical needs that the family will consider.
- List the special needs and severity that the family is not open to.



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- ~~Adoptive parents must be advised that all children born and adopted from other countries can be considered to have some special needs. Consider using such wording as, “the applicants are requesting to adopt a child as healthy as possible” or “the applicants wish to adopt a child who appears to have the potential to develop normally”. If the adoptive parents are open to adopting a child with special needs, please include any and all of the specific special needs for which the applicants are prepared to parent and what steps they have taken to educate themselves about those particular needs.~~
- State the applicants’ capacity for setting realistic expectations for the child’s behavior and performance based upon the age, ability and/or special needs of a child, such as, “Mr. and Mrs. XX understand that each child has unique behavioral and performance abilities based upon his or her age, ability, and special needs. Mr. and Mrs. XX are capable of setting realistic expectations for their child.”
- **Do not identify a specific child to be adopted in the home study. However, if the family is hoping to adopt a particular child, please ensure that the pre-adoptive training includes individualized counseling and preparation to meet the needs of the particular child.**

### Section 5: Motivation to Adopt

- If part of the motivation to adopt is infertility, include a brief summary of the fertility issues and how they came to decide to adopt internationally.
- Do NOT include any humanitarian statements.
- Include how the applicants are educating themselves regarding the child’s birth country, how they came to select that particular country/region, and statements on how they intend to educate their child about adoption and their birth country.

### Section 6: Applicant’s Personal History and Identification

- Include a section for each adoptive parent, including **all biographical information**: childhood, adolescence, and adult memories. Include background information on discipline, interactions with siblings and parents, significant events, personal tragedies, and other major life experiences.
- Indicate if extended family members are supportive of the PAP’s adoption plans.
- If there has been a personal tragedy or trauma include ask the applicant how they coped with the event.
- It is helpful to provide evidence of resiliency and how the applicant has been able to cope while under stress. Examples of coping mechanism include: connecting with family and friends, prayer, seeking supports, relaxation, physical outlets, problem solving etc.
- Include a self-identified list of strengths and weaknesses for each prospective adoptive parent.
- Discuss education, work experience, interests and hobbies, religion, and spare-time activities.
- Describe the circumstance surrounding the applicants’ desire to adopt a child (children), addressing any infertility issues, specific reasons the applicants have chosen to adopt, and their ability to undertake an inter-country adoption, social environment specific to parenting an adopted child, and information about the applicants’ suitability and eligibility to adopt.
- Identify what the PAP believes to be his or her greatest accomplishment to date.



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### Section 7: Children in the Home

Include a paragraph for each child who is currently living in the home.

- a) Child's full name
- b) Date of birth
- c) Country of birth
- d) Alien registration number (Found on the upper corner of the Certificate of Citizenship)
- e) Any special needs (Indicate the time, resources, and care required by the parents to meet these needs.)
- f) Any criminal history as per parental report or clearances. Indicate if your state laws prohibit criminal clearances for minors.
- g) Any additional information that is relevant to the overall suitability of the home and the PAP's ability to care for additional children in light of the children already in the home.
- h) If adopted, date and country of adoption
- i) School name and grade
- j) General description of child - appearance, personality, hobbies, etc.
- k) Include how each parent views each child in the home. *Mrs. X described Tommy as, "bright....." He was described by his father as, "Playful, active and ....."*
- l) Attitude and feelings of child about the family's adoption plans (if at all possible **use quotes**)
- m) Observations of child and observation of parent-child interactions. IF observations of a child or children is not possible, explain why. Examples of observations are below:
  - What is the child doing during the visit?
  - Describe parent-child interactions. Does the child seek: assistance, approval, supplies, or to give or get affection, involve parent in play?
  - Describe the overall tone of the interactions: supportive, playful, happy, firm limit setting, facilitative, etc.Example of Observations: *"This writer observed Lola interacting with her parents during the home study visits. It is clear when talking with Lola that she is secure in her attachment to her parents and siblings, well adjusted, and adaptable. She is a happy, easy going child who likes to play and have fun."*
- i) Identify any other children living outside the home or any adult children and include their feelings about the adoption.

### Section 8: Marital Relationship/Support Systems

- Include each spouse's views of each other & their attitude towards marriage
- Extent of satisfaction with their marriage
- Discuss patterns of communication, coping with difficult situations, problem solving skills, willingness and ability to discuss and deal appropriately with feelings of anger, frustration, sorrow, conflict, and affection
- Methods of handling disagreements
- Document activities the husband and wife enjoy together.
- State who and where their support network is.
- State that the applicant(s) show evidence of a stable living arrangement for more than 1 year.



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- State that number of previous marriages for each spouse. (For example, “*This is the first marriage for Mr. Smith, and the second for Mrs. Smith*”.)
  - For previous marriages, include the date of the marriage, the date of the divorce, a summary of why the previous marriage(s) failed, and why the applicant believes their current marriage is more successful and stable.

### Section 9: Parenting Preparation

- State the applicants’ experience with children and their philosophy on child-rearing.
- If there are already children in the home, include a summary of the applicants’ relationship with the child/ren.
- For applicants who do not have children, include a description of their interactions with children either through extended family, babysitting, church
- Discuss the applicants’ plans for discipline. **This section must include a statement that the prospective parents will not use corporal punishment and their plans to use positive behavior management** (this proactive approach which appreciates positive behaviors, teaches alternate responses, and allows for “re-do’s.”)
- Discuss their preparation, willingness to work cooperatively with an agency, willingness to seek help and resources and ability to provide proper care for a child. Ex: “*Mr. and Mrs. X were fully engaged in the home study process and eager to do adoption related trainings. They have voiced their willingness to access resources to meet the needs of their child. They were open and forthcoming with all information and questions asked during this home study process.*”
- Describe child care plans.
- If there is business conducted in the home, include the parent’s plan of how they will ensure that business activities will not interfere with the child’s care.
- Include the family’s plan to integrate a child into the household, a plan for discussing adoption with the child, and implementing the child’s birth country culture.  
**Consider including:** Preparing the children already in the home, make sure everyone in the family is included, in an age appropriate manner, in the decision to adopt, the home study process, and the adoption training. Preparing the child to be adopted through correspondence prior to the gotcha day. Identify activities the entire family can enjoy together, identify a person who is able to translate, and other plans to promote attachment. Include plans about creating and using life books and discussing adoption with the child.
- Include an assessment of the applicants’ understanding of inter-country adoption, potential risks, delays, expenses and potential issues regarding attachment, bonding and adjustment.
- Include details on the parent education/training undertaken and what the applicants have learned about inter-country adoption issues, including but not limited to issues related to children who have grown up in an institution, children who may have been neglected, raising a child from a different culture/race/religion, raising an older child, etc. The **15** hours of Hague required training **MUST BE COMPLETED** before a favorable home study can be approved. There must be a discussion about the specific training courses taken.
- Required Book reports; Include the following statement for MAA's on-going training policy, “*Madison Adoption Associates requires that each parent read at least three books related to*



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*adoption. Mr. and Mrs. X are currently in the process of doing so and will submit book reports to Madison Adoption Associates prior to travel.”*

**Please note:** The 15 hours of Hague required training must have been completed within the last 2 years. If the training is older than 2 years, the parents must complete 15 additional hours of Hague required training. It is important that the training be completed before the final home study visit so you, the social worker, can review and discuss the trainings with the clients.

**If the adoption may involve a child with special needs, an older child, siblings, or a child who will be out of birth order, the social worker must include a detailed discussion and plan about the family’s preparedness for this situation, and what counseling or therapy resources they have in place, if needed.** The family is required to complete the MAA Special Circumstances Preparation Packet.

- Discuss and include:

*The applicants have realistic expectations and understand that an adoption is a permanent, irrevocable and unconditional commitment to care and nurture a child. The family understands that they are financially responsible for the child(ren), and their family is prepared to provide any physical, emotional and/or financial assistance that is needed in the best interests of the child(ren).*

### Section 10: Health of Applicants

Provide the following information for each adoptive parent:

- a) Name of physician (MUST BE A DOCTOR OR PHYSICIANS ASSISTANT, if a nurse practitioner signs the form the supervising doctor must also sign) and date the applicant was examined.
- b) Identify medications currently being taken by the applicant and why they are prescribed. If applicable, Please clearly state, “*Mr. X is prescribed no medications.*”
- c) Identify any disabilities of the parents and address if those will affect the ability to care for a child.
- d) Note BMI of each parent:  
[https://www.nhlbi.nih.gov/health/educational/lose\\_wt/BMI/bmicalc.htm](https://www.nhlbi.nih.gov/health/educational/lose_wt/BMI/bmicalc.htm)
- e) The physician’s assessment of their health and physician’s medical license number.
- f) The social worker’s observations regarding the applicant’s general well-being.
- g) Fully address any behavioral issues of adult household members.
- h) If there is a history of substance abuse, fully address the individual’s rehabilitation, length of sobriety, history of treatment, current coping mechanisms. (8 CFR 204.311(g)(4) requires that the home study preparer refer an individual to a substance abuse counselor if there are areas beyond his/her expertise that need to be addressed.
- i) The name of the Psychologist who evaluated the prospective adoptive parents
- j) Date of the psychological evaluation



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- k) The psychological tests that were administered  
 l) The Psychologist's recommendations from the psychological report

**Hague requires specific wording for this section: Sample**

*Mr. and Mrs. Smith were both seen by their physician, Dr. John Ouch (medical license #123456) of Happy Valley, Pennsylvania on July 25, 2017. They were both found to be in good health with no physical or mental limitations that would prevent them from raising an adopted child. Mrs. Smith takes medication for hypertension which is under control. Mr. Smith takes medication for allergies and high Cholesterol which is under control. Dr. Ouch states that both Mr. and Mrs. Smith are suitable to raise an adopted child, and they have no physical, mental, behavioral or psychological problems that would affect their ability to raise a child. Neither Mr. nor Mrs. Smith has displayed any indication of alcohol or drug abuse. My observations support the physician's findings of mental stability, and their good physical, mental and emotional health. I am satisfied with the above findings of the physician, and no further evaluations, tests, or referrals have been required.*

**Section 11: Employment and Finances**

- Current annual income and verification of employment for both applicants
- Most recent year's total federal income amount taken, as stated on IRS tax forms
- Total assets, total liabilities and total net worth (stated in dollar amounts)
- Total monthly expenditures, total monthly liabilities/bills, excess spending money per month
- List all insurance coverages, including health, auto, homeowner's/renter's, life, disability, etc.
- If the applicants have high debt, describe how the applicants plan to pay the costs of an international adoption. Include a statement of endorsement of their financial management and their ability to raise a family given their financial status.
- Please use the following format within the home study:

**Yearly Annual Income:**

According to most recent Federal Tax Return \$ \_\_\_\_\_

**Husband Annual Salary:** \$ \_\_\_\_\_

**Wife Annual Salary:** \$ \_\_\_\_\_

**Monthly Net Income:**

Husband	\$ _____
Wife	\$ _____
Investments	\$ _____
Alimony and/or Child Support	\$ _____
State or Federal Assistance (SSI, Food Stamps, WIC, etc.)	\$ _____
Other _____	\$ _____

**TOTAL:** \$ \_\_\_\_\_

**Monthly break down of expenses:**

Mortgage / Rent	\$ _____
Home Owner's Association Dues	\$ _____
Car Payments	\$ _____

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Utilities (phone, cell phone, gas, water, electric, internet and cable/dish)	\$ _____
Home Owner's / Renter's Insurance	\$ _____
Car Insurance	\$ _____
Union or Professional Dues	\$ _____
Alimony and/or Child Support	\$ _____
Food	\$ _____
Clothing Expenses	\$ _____
Family Fun / Entertainment	\$ _____
Medical / Prescription Expenses	\$ _____
Health Insurance	\$ _____
Life Insurance	\$ _____
Charge Accounts and Loan Payments	\$ _____
Investment / Retirement Contributions	\$ _____
Religious contribution	\$ _____
Average monthly donations to other non-profit organizations	\$ _____
Other _____	\$ _____

**TOTAL:** \$ \_\_\_\_\_

**Average Monthly Checking account balance over past 12 months:** \$ \_\_\_\_\_

### **Financial Assets:**

Value of residence	\$ _____
Amount in savings	\$ _____
Amount in investments	\$ _____
401(K) or Retirement Savings	\$ _____
Personal Property	\$ _____
Other assets	\$ _____

**TOTAL:** \$ \_\_\_\_\_

### **Financial Liabilities:**

Mortgage balance due on property owned	\$ _____
Loan balance for motor vehicles	\$ _____
Loan balance for all other loans	\$ _____
Credit Card Balance(s)	\$ _____

**TOTAL:** \$ \_\_\_\_\_

**Total Net Worth (Financial Assets – Financial Liabilities)** \$ \_\_\_\_\_

### **Life Insurance Coverage:**

Husband	\$ _____
Wife	\$ _____
Additional Life Insurance- For _____	\$ _____





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### Section 12: Description of Home and Neighborhood

Describe in detail the home and neighborhood, and an evaluation of adequate space for another child. How many bedrooms in the home? Where will the child sleep? Confirm that there are no safety concerns for a child entering the home.

- Include verification of working smoke detectors
- Location of fire extinguishers
- Child safety features in the house
- If there are firearms in the home, include the following: Does the owner have a valid permit and registration? Are the guns and ammunition stored in a locked container, inaccessible to children and stored separately?
- If there is a water hazard, specify safety features.
- If there are pets in the home verify that the pets are up to date on their vaccinations as per veterinarian records and pose no danger.
- Include details from the home safety check (For example: “*All poisonous, caustic, toxic, flammable or other dangerous materials are stored in an area inaccessible to children.*”)
- Include a description of the room where the adopted child will sleep (For example: *The adopted child will be sleeping in a 12’x20’ room with 2 closets and bunk beds. The room has ample room for a dresser, book shelves and toys.*)
- Please note if home is handicap accessible.

Use information from the Home Safety Checklist to add detail about the home environment.

#### *Sample Concluding Statement*

*The applicants’ residence meets the Pennsylvania State code for safety and living space. Madison Adoption Associates is a (choose one -DE,NJ,PA,IL) state certified/licensed adoption agency, license/certificate #\_\_\_\_\_.*

### Section 13: State Pre-adoption Requirements

- Describe the state’s pre-adoption requirements for any state which the child may reside, describe what requirements they will or will not have met and why, and cite any relevant state statutes or regulations.
- Or Explain that the state(s) of intended residence do not have any preadoption requirements.
- DE, PA, NJ and IL pre-adoptive requirements are listed below.

**Delaware:** Pursuant to the Delaware Code, Title 31, Chapter 3, Subchapter III, Subsections 341-345, also known as “The Delaware Child Care Act.” Prospective Adoptive Parents (PAPs) shall: Receive training in areas of: how the adoption process works; children available for adoption; issues specific to the type of adoption planned and child sought; abuse and neglect including impact of trauma on child’s development; parental substance abuse exposure; grief and loss; attachment and bonding issues; child development; positive behavior management; birth parent or former guardian relationships, and lifelong adoption issues. The PAPs have completed a minimum of 12 hours of adoption training which includes the above topics.

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\_\_\_\_ Complete an adoption application; submit a copy of a driver's license, State or federal identification, or birth certificate and be older than 21 years of age. Submit contact information for at least 4 references, at least three of these references shall be from people not related to the applicant. As required by 31 Delaware Code, Section 309 and the Federal Child Protection and Safety Act a fingerprinted background check has been completed, the check consisted of a search of FBI and SBI criminal records, along with a name-based search of applicable child abuse and neglect records. A name-based search of Delaware Adult Abuse Registry and the Delaware State Family Court records have been conducted. Child abuse and neglect clearances must be collected for each state in which the PAPs has resided over the past 5 years. These clearances have been completed and verified.

PAPs must provide health appraisals for all household members, that includes a TB test or risk assessment. PAPs must demonstrate that their income will meet the household's needs. MAA has collected and verified the PAPs net-worth and monthly income. Required proof of home-owners, health, vehicle insurance (if applicable) and life insurance and guardianship plan have been verified by MAA. If applicable pet's veterinarian records have been verified by MAA. PAPs are required to share their child care plans with MAA. MAA has ensured that all Delaware requirements have been met. MAA maintains a current record through finalization.

<http://regulations.delaware.gov/AdminCode/title9/Division%20of%20Family%20Services%20Office%20of%20Child%20Care%20Licensing/200/201.shtml>

**New Jersey:** Pursuant to the State of New Jersey Department of Children and Families Manual of Requirements for Adoption Agencies, chapter 50, N.J.A.C. 10:121A-5.6 Prospective Adoptive Parents (PAPs) shall:

Attend 3 in-person contacts with the home study agency on 3 separate dates. Obtain Criminal History Record Information (CHRI) fingerprint background checks for all persons residing in the home who are 18 years old or older. As required by the state, PAPs and adult household members must obtain Child Abuse Record Information (CARI) background checks from the Department. PAPs must also submit medical reports for all persons living in the home and supply one current job reference, three personal references from persons unrelated to the PAPs, one reference from a neighbor, and one reference from a person who has known the adoptive applicant for more than 5 years. PAPs must supply a valid driver's license with photo identification, a valid passport or other government issued photo identification. Additionally, PAPs will supply verification of present and previous marriages and divorces. PAPs are also required to describe viable child care plans. MAA has verified that the PAPs meet all the requirements of the N.J.A.C. 10:121A-5.6.

<https://www.state.nj.us/dcf/providers/licensing/laws/AManual.pdf>

**Pennsylvania:** Pursuant to the State of Pennsylvania Chapter 3350.12 Statement of Policy on Adoption and Record Disclosure Procedures the Prospective Adoptive Parents shall:

Attend a minimum of 3 in-person contacts with the home study agency on 3 separate dates. Provide a medical history and recent physical examination as evidence that the applicants are in good physical and mental health and able to undertake the responsibilities of parenthood. PAPs must provide information concerning marital relationship, emotional, and financial status, and attitudes of the family toward adopting a child. PAPs are required to obtain a PA Department of Human Services Child Abuse History Certification, a PA State Police

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~~Criminal Record Check and a Federal Criminal History Check. PAPs are also Required by 23 Pa. C. S. §§ 6301-6385 known as The Child Protective Services Law (CPSL), and as amended by Act 160 of 2004 to~~

complete a PA Disclosure form. MAA has verified that the PAPs meet all the requirements of the State of Pennsylvania Chapter 3350.12. <https://www.pacode.com/secure/data/055/chapter3350/chap3350toc.html>

**Illinois:** Pursuant to the State of Illinois Child Care Act and Policy Guide 2017.04 the Prospective Adoptive Parents and home shall:

Meet the minimum requirement of adoptive homes. PAPs must be thoroughly assessed for physical, mental, financial, and emotional ability to successfully parent a child through adoption. PAP and all adult residents must pass a criminal background pursuant to Section 3.3 of the Child Care Act. Child abuse background checks of all residents in the home who are 13 years of age or older must be passed. All prospective adoptive family members living in the home must have their health assessed. A summary of at least three-character references will be provided on the prospective adoptive parent. Adoption education and training of the prospective adoptive parents will be conducted and assessed with at least 4 hours being face to face.

### Other States:

Describe the PAP's state of residence pre-adoption requirements and the steps the PAPs have or will take to comply with them. Explain if there are no state preadoption requirements.

### Section 14: Religion (Not required)

- Identify which religion is practiced by the prospective adoptive parents
- Name of church/temple/meeting house and length of time the family has been actively participating
- If applicable: Note adoptive parents volunteering or participation in any church activities
- If applicable: Note if the children attend any type of religious education or church activities

### Section 15: Criminal and Child Abuse Clearances

**Hague has specific required wording for the beginning of this section: Sample**

*During this interview process, Mr. and Mrs. Smith were informed of their duty to disclose. Mr. and Mrs. Smith have each been informed and understand that under penalty of perjury it is their duty to disclose all information under 8 CFR 204.311(i). Mr. and Mrs. Smith are aware that they must notify their home study preparer and USCIS of any new event or information that might warrant submission of an amended or updated home study. They have also been advised that their duty to disclose is ongoing while form I-800A is pending, after form I-800A is approved, and while any form I-800A is pending until there is a final decision admitting the child to the U.S. on a visa.*



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Provide the following information for the applicants and any children who are within six months of their 18<sup>th</sup> birthday at time of study.

**States of Residence since 18 years of age:** List all states where the applicant has lived in since the age of 18. Each applicant must obtain a child abuse clearance from these states. List the date of clearance and the name of agency that provided it.

### Sample

Since the age of 18, Mrs. Smith has resided in the following states: New Jersey, Ohio, and Illinois. Mrs. Smith lived in the state of Ohio from 1984 until 1992. A child abuse clearance from the Ohio Department of Job and Family Services dated September 5, 2010 states that Mrs. Smith has no record as an alleged perpetrator.

**Criminal Clearances:** Provide all criminal clearances required by your state. MAA requires a minimum of a state criminal check. Please list the date of each clearance and the name of agency that provided it.

USCIS is requiring a criminal clearance statement on every household member including children. The statement for a young child could be “*XXXX has no criminal record per his parents.*”

**IL:** This must include the Illinois State Police, Federal Bureau of Investigation, Illinois Sex Offender Registry, National Sex Offender Registry, and Murderer and Violent Offender Against Youth Registry.

**IF CRIMINAL RECORD EXISTS** for either applicant or any other household member, describe the judgment and sentence, rehabilitation, repentance and correction where applicable. Based on this information, the social worker must make an assessment of the applicant’s eligibility to adopt, taking into account all applicable state and local laws. The social worker must detail the circumstances of a criminal history and must submit to Madison Adoption Associates all supporting documents including the disposition of charges and the applicant’s signed recollection of the event(s).

### Section 15: USCIS Regulations Compliance

The following questions must be asked of each applicant. Do not paraphrase. If an applicant answers “yes” to any of these questions, the social worker must explain the situation in detail. The questions must be written out in the exact format listed below:

#### Hague Required Wording:

In addition to the documentation received, the following questions were asked of Mr. and Mrs. Smith during the home visit on January 15, 2019.

Have you ever been arrested and fingerprinted, even if the record was sealed, pardoned, or expunged?  
Mr. Smith answered, “No.” Mrs. Smith answered, “No.”

Do you have a history, or have you ever been accused of child abuse, sexual abuse, and/or domestic/family violence in the United States or abroad, even if it did not result in an arrest or conviction?

Mr. Smith answered, “No.” Mrs. Smith answered, “No.”



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Do you have a history with child protective services in the U.S. or overseas?

Mr. Smith answered, "No." Mrs. Smith answered, "No."

Have you ever been the subjects of an unfavorable home study or been rejected as prospective adoptive parents?

Mr. Smith answered, "No." Mrs. Smith answered, "No."

Do you have a history, or have you ever received treatment for drug, alcohol, substance abuse, and/or any other addiction?

Mr. Smith answered, "No." Mrs. Smith answered, "No."

Have you ever been determined to be partially or fully mentally incapacitated by any court?

Mr. Smith answered "No." Mrs. Smith answered "No."

Has immigration ever refused you visa clearance?

Mr. Smith answered "No." Mrs. Smith answered "No."

Have you ever transferred or received permanent custody of a child outside of the state/local authorities or state/local process?

Mr. Smith answered, "No." Mrs. Smith answered, "No."

Have you ever relinquished custody of any child?

Mr. Smith answered, "No." Mrs. Smith answered No."

### Section 16: Others in Household

- All persons living in the home must have a medical evaluation to determine that they are free from communicable diseases.
- All adults over age eighteen (18) years must have criminal background checks from the current state of residence, child abuse clearances from each state where they have resided since their 18<sup>th</sup> birthday, and all answers the USCIS questions above.
- There must be a brief description of each person and their thoughts/attitude regarding the pending adoption.

### Section 17: Previous Home Study

Include this section if the applicants have previously completed an adoption home study.

#### Sample

*Mr. and Mrs. Smith were asked if they have ever had a previous home study begun or completed in relation to an adoption or any form of foster care or other type of custodial care. Mr. and Mrs. Smith completed a previous home study through **Madison Adoption Associates** for the adoption of their son, Andrew. An application for the previous home study was dated September 7, 2017. The home study*

*report was finalized November 14, 2017. Mr. and Mrs. Smith were recommended as adoption parents and their household was found to be suitable for adoption. Therefore they have never been rejected as prospective adoptive parents, nor have they been the subjects of an unfavorable home study.*

### Section 18: References

Identify all references provided by the applicants. All references must be verified either in person or by telephone. This must be stated in the home study report. Include quotes.



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### Section 19: Guardian

Include information on the named guardians for the child – specifically, the guardian’s name(s), age, profession, approximate income, health, and ages and names of guardian’s children. If adopting from Colombia, guardians must meet the eligibility requirements for adoption applicants. Guardians should preferably be a married couple. If the applicant’s guardian is single, please include a back-up guardian. State your assessment of the appointed guardians as suitable for parenting the child.

### Section 21: Country Pre-adoption Requirements

Colombia requires that prospective adoptive parents be at least 25 years of age and at least 15 years older than the child at the time of application. The oldest prospective adoptive parent should not be more than 45 years older than the child that is being adopted, however exceptions may be made for children with more moderate special needs. The family must be financially stable and be able to provide for the needs of the child as approved by USCIS. The prospective adoptive parents must be married for at least 2 years, together for 3, and have no more than 3 divorces per a couple. Single parents as well as same sex married couples of either gender are allowed to adopt children with special needs. Families adopting from Colombia must be mentally and physically fit to parent. Prospective adoptive parents who have had cancer must be in remission for at least 5 years. Prospective adoptive parents must have at least 15 hours of Hague approved adoptive training.

### Section 22: Summary and Recommendations

- a) The report must state a determination of whether the prospective adoptive parent(s) are eligible and suited to adopt. If approved, the home study preparer must list the specific approval, i.e. number of children, gender, nationality, age, any specific special needs they are approved for, and any restrictions to the adoption. Be sure to state what they are not approved for.

#### *Sample Approval Statement:*

*Mr. and Mrs. Smith are recommended and approved to adopt one child, of either gender, from Colombia, who is between 0 years and 5 years at the time of referral, who has minor to moderate special needs including but not limited to cleft palate, limb differences, cerebral palsy, heart conditions, developmental delay, and/or birthmarks.*

- b) Include a paragraph stating that the applicant has agreed to post-adoption supervision according to the guidelines established by the family’s state of residence, the child placement agency and the child’s country of birth. Madison Adoption Associates requires placement/post-adoption visits to be completed at 30 days, 6 months, 12 months, 18 months, and 24 months.
- c) Please consider using this statement: “*Mr. and Mrs. X agree to comply with the Colombia, the State of ZZ, and Madison Adoption Associates post placement requirements. The reports will be completed at 30 days, 6 months, 12 months, 18 months, and 24 months post-placement.*”  
\*PA families only - Pennsylvania adoptive families have access to the State-Wide Adoption and Permanency Network services.



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- d) ~~Include a paragraph that the applicants meet the criteria of the country from where they are adopting.~~

*Sample for Colombia:*

Mr. and Mrs. Smith meet the requirements to adopt from Colombia. Mr. and Mrs. Smith, who wish to adopt a child with special needs, are at least twenty-five years old and at least fifteen years older than the child to be adopted, the mother is no more than forty-five years older than the child to be adopted, and have been married for over two years or together for three years and have no more than three divorces per a couple. Single women, as well as same sex married couples of either gender, are permitted to adopt children with special needs. They are physically and mentally healthy, and neither has taken psychotropic drugs in the last two years. They are financially stable and able to provide for the individual needs of each family member, including the child to be adopted. Both Mr. and Mrs. Smith have earned at least a high school degree. Neither Mr. nor Mrs. Smith has a history of criminal activity or child abuse.

- e) Include a statement approving the family to adopt from Colombia.

*Sample:* I highly approve Mr. and Mrs. Smith to adopt a child of either gender, 0-3 years of age at the time of the referral, from Colombia with minor special needs including, but not limited to hearing impairments, heart murmurs, and limb indifferences.

- f) Include a conclusion at the end of the report:

*Sample*

Mr. and Mrs. Smith have successfully met the pre-adoptive requirements of adoption for the State of Pennsylvania. This home study report has been prepared in accordance with licensing standards for approved adoption agencies, the State of Pennsylvania, USCIS, Hague Convention and the Council on Accreditation. This home study is a true and accurate original of the home study which has been provided to the adoptive family. This home study was performed in accordance with 8 CFR 204.311 and any applicable state laws.

Home Study Agency is a non-profit agency licensed by the State of Pennsylvania as a child placement agency authorized to conduct adoption/home study services (license # \_\_\_\_\_). Under 22 CFR Part 96, Home Study Agency is operating as an Exempt Provider for **Madison Adoption Associates** who has earned full Hague accreditation.

This home study was completed by Mary Anne Jones, MSW. The writer has a Master Degree in Social Work and is licensed in Pennsylvania. I am an employee of Home Study Agency with over eight years experience. I meet all state, federal and Hague regulations to conduct home study and post-placement/ post-adoption reports.

I, Mary Anne Jones, MSW, verify that under perjury of law of the United States of America that I have acted with the professional diligence necessary to protect the best interest of any child whom the applicant might adopt in preparing the home study, including personal interviews, home visits, and all other aspects of the investigation needed to complete the home study. The content and statements within this home study are true and correct to the best of my knowledge, information and belief. I have notified the applicants of their duty to disclose information, and of their duty disclose any new information or new events per the Hague regulations. I certify that this is a true and accurate copy of the home study as provided to the prospective adoptive parents, DHS, USCIS, and Colombia. I verify that this home study meets all state, federal, and inter-country requirements.

Society Office Complex  
1102 Society Drive  
Claymont, DE 19703



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Fax: 302-529-1976  
MadisonAdoption.org

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### Section 20: Signatures

- a) The report must be signed by the Social Worker who wrote the report
- b) The report must be signed by the Executive Director of the Home Study Agency
- c) The report must have a final date
- d) The report must be signed by the applicants (DE state residents only)
- e) The report must be notarized
- f) The report must include the expiration date of the home study according to the adoptive family's state of residence.





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For each **person living in the home**, age 17 and over, confirm that this language is contained in the home study report for that person. Please complete the table on the next page.

<p><b>Health Hague Statement:</b></p>	<p><b>NAME</b> has not displayed any indication of alcohol or drug abuse. My observations support the physician's findings of mental stability, and his/her good physical, mental and emotional health. I am satisfied with the physician's findings and no further evaluations, test, or referrals have been required.</p>
<p><b>Duty to Disclose:</b></p>	<p>During this interview process, Mr. and Mrs. <b>NAME</b> were informed of their duty to disclose. Mr. and Mrs. <b>NAME</b> have each been informed and understand that under penalty of perjury it is their duty to disclose all information under 8 CFR 204.311(d). Mr. and Mrs. <b>NAME</b> are aware that they must notify their home study preparer and USCIS of any new event or information that might warrant submission of an amended or updated home study. They have also been advised that their duty to disclose is ongoing while form I-800A is pending, after form I-800A is approved, and while any form I-800 is pending until there is a final decision admitting the child to the U.S. on a visa. The home study preparer also advised Mr. and Mrs. <b>NAME</b>, and they expressed their understanding, of 8 CFR 204.311(c)(13) and (14) and 204.311(j) concerning history of substance abuse, sexual abuse, child abuse, child neglect or family violence. In particular, they understand that a single incident of sexual abuse, child abuse, or family violence is sufficient to constitute a "history."</p>
<p><b>USCIS Questions:</b></p>	<p>Along with the documentation received, the following questions were asked of Mr. and Mrs. <b>NAME</b>:</p> <p><i>Have you ever been arrested and fingerprinted, even if the record was sealed, pardoned, or expunged?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Do you have a history or have you ever been accused of child abuse, sexual abuse, and/or domestic/family violence in the United States or abroad, even if it did not result in an arrest or conviction?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Do you have a history with child protective services in the U.S. or overseas?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Have you ever been the subjects of an unfavorable home study or been rejected as prospective adoptive parents?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Do you have a history of or have you ever received treatment for drug, alcohol, substance abuse and/or any other addiction?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Have you ever been determined to be partially or fully mentally incapacitated by any court?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Has immigration ever refused you visa clearance?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Have you ever transferred or received permanent custody of a child outside of the state/local authorities or state/local process?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p> <p><i>Have you ever relinquished custody of any child?</i> Mr. <b>NAME</b> answered, "No." Mrs. <b>NAME</b> answered, "No."</p>



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<b>Previous Home Study:</b>	<p>Upon direct questioning by this social worker, Mr. and Mrs. <b>NAME</b> were each asked if they have ever had a previous home study begun or completed in relation to an adoption or any form of foster care or custodial care. Mr. and Mrs. <b>NAME</b> both stated they have not. Therefore, they have never been rejected as prospective adoptive parents, nor have they been the subjects of an unfavorable home study.</p> <p style="text-align: center;">OR</p> <p>Mr. and Mrs. <b>NAME</b> were asked if they have ever had a previous home study begun or completed in relation to an adoption or any form of foster care or other type of custodial care. Mr. and Mrs. <b>NAME</b> completed a previous home study through <b>AGENCY</b> for the adoption of their daughter, <b>NAME</b>. An application for their previous home study was dated <b>MM/DD/YY</b>. The home study report was finalized on <b>MM/DD/YYYY</b>. Mr. and Mrs. <b>NAME</b> were recommended as adoptive parents and their household was found to be suitable for adoption. Therefore, they have never been rejected as prospective adoptive parents, nor have they subjects of an unfavorable home study.</p>
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Checklist for required language in home study report:

<b>Household Member Name (and nanny if applicable)</b>	<b>Age</b>	<b>Age 17 and older - indicate page number(s)</b>			
		<b>Health Hague Statement</b>	<b>Duty to Disclose</b>	<b>USCIS Questions</b>	<b>Previous Home Study</b>