ADOPTION CENTER FOR FAMILY BUILDING

8140 McCormick Blvd., Suite 131, Skokie, IL 60076 (847-674-3231) AND

8645 Connecticut St., Merrillville, IN 46410 (219-795-9900)

ADDRESS ALL CORRESPONDENCE TO OUR ILLINOIS OFFICE

APPLICATION FOR ADOPTION PREPARATION AND HOME STUDY

	DATE					
LAST NAME OF APPLICA	ANT(S)					
1ST APPLICANT	× 1					
First	Middle	:	Last	(name you pref	er to be called	
Preferred Pronouns	s	Birthdate				
Birthplace		Race				
Education						
Employment						
Occupation						
Social Security #_		_ Annual I	ncome			
2 ND APPLICANT						
First	Middle		Last	(name you pref	er to be called	
Preferred Pronoun	s	Birthdate				
Birthplace		Race				
Education						
Employment				···		
Occupation						
Social Security # _		Annual I	ncome			
CURRENT MARITAL ST	ATUS: married	single divor	ced separated	other (describe)		
PRESENT ADDRESS	Street	City	State	Zip	County	
How long resided					County	
CONTACT INFORMATIO	ИС					
Name			Name			
(Cellular)				· · · · · · · · · · · · · · · · · · ·		
(Business) If other than cellular					-	

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(Email)	
MARRIAGE DATE AND PLACE Previous marriages (date, place and	where terminated)
CHILDREN Yes No	
If yes, names and ages	
By birth By adoption	By remarriage
	DLD
REFERENCES (Please provide the names ar persons who know how you care for children RELATIVES	nd addresses of two close relatives and five unrelated
В	
PERSONAL	
C	
D	
E	
Are any of the following in your backgrounds history of drug use, hospitalizations, mental h	s (current or past): criminal record (both arrests & convictions), nealth issues (such as counseling)? If yes, please comment.
How long have you lived in Illinois or Indian How did you hear about us?	a? 1st Applicant2nd Applicant
· · · · · · · · · · · · · · · · · · ·	on at ACFB? If so, dateWith whom
	House? If so, date With whom
Are you requesting a Domestic or Internation If you working with an out of state agency for contact person:	al home study? r a domestic adoption, please provide name, address and
If international, what placing agency and coun The information we/I have provided on this a	ntry?pplication is true to the best of our/my knowledge.
SIGNATURE(s)	
(1st Applicant)	(2 nd Applicant)
PRINT NAME	
Date Please ret	urn Application, Fee Schedule, and Information Disclosure
Acknowle	dgement to our Skokie office, along with the \$450 application fee.

March 2022



Agency Fee Schedule

<u>Application</u>	\$450
Illinois Home Study	\$3,000
Indiana Home Study	

Home Study includes: Counseling and preparation, assessment of emotional, physical and financial stability, compliance with state requirements

- Post Placement visits \$400 each
- Annual Home Study update...Domestic \$1,000; International \$1,150
- IL Home Study for second adoption...\$2,200
- IL International Home Study...\$4,000
- IN Home Study for second adoption...\$1,800
- IN International Home Study...\$4,000
- Change of address update...\$450
- Additional fee for Expedited Home Study...\$600
- Embryo Donation Family Study...\$1,600
- Step-Parent/Relative Adoption...\$1,150
- Coordination with another agency
 - If you are working with more than one other agency/consultant, there will be an administrative fee of \$150 per additional agency/consultant

Program Services*

- Program fee includes:
 - second consultation
 - website management
 - multi-state marketing
 - matching services
 - supportive counseling
 - Program participants are required to update their home study annually

Placement Services

Includes: Case management, counseling, placement and post placement services

I. <u>Traditional Program</u> (Adoptive family is matched with birth mother and counseling services are initiated for birth mother)

II. Agency Assisted Program (Client locates a birth mother and initiates services)

- (1) Match fee is non-refundable, but paid only once
- (2) Additional expenses associated with an adoption include birth mother and agency expenses, newborn hospital care, legal costs
- (3) Reduced placement fee for families with incomes under \$100,000
- (4) Birth mother residing outside of Illinois or Indiana: match fee plus \$4,500 placement fee
- (5) Reduced placement fee available for African American families. This agency is committed to diversity and insuring that African American birth parents have choices.

lies only to families who do not reside in	the state in which the baby is born
The following is a list of possibl	le expenses:
established to cover birth mother livi	nd Agency Expenses – When a match occurs, an escrow is ing expenses and agency expenses (i.e. birth parent counselor's stative Father Registry, overnight mailings. Any remaining balance
Newborn Hospital Care - Typicall	ly covered under adoptive parent insurance.
<u>Training/Adoption Education</u> - No required training offered by outside r	to charge for ACFB adoption education classes, but there are costs resources.
Background Clearances - Fees cha	arged for obtaining clearances are paid to a third-party vendor.
Birth Mother Medical - if needed	
Client Advertising - Print or online	e (optional)
Legal services and court costs - P	Paid to attorney
DCFS Subsidy Application Assis	stance (if child has special needs) - \$1,500
I understand that my adoption	cannot be finalized until all fees have been paid-in-full.
Furthermore, I understand that thi	knowledge that I have received a copy of this fee schedule. is agency cannot guarantee that I will be approved as an ill be placed with me, or that the court will approve the
Signed by:	Signed by:
Print name:	Print name:
Date:	Date:

initiated. There is a 3% service fee for all credit card payments \$1,000 and over. ACFB does not accept credit card payments for the placement fee. Fees are subject to change.

Fees current as of April 2022

Adoption Center For Family Building 8140 McCormick Blvd., Suite 131 Skokie, IL 60076

INFORMATION DISCLOSURE ACKNOWLEDGMENT Prospective Adoptive Parent(s)

WE/I, ACKNOWLEDGE THAT INFORMATION ABOUT THE FOLLOWING HAS BEEN PROVIDED BY THE CENTER*:

1.	Description of adoption services and programs							
2.	Summary of Policies and Practices							
3.	General Eligibility requirements							
4.	General description of fees and refund policy							
5.	Written Rights and Responsibilities of Birth and Adoptive Parents, as provided by DCFS							
6.	Grievance Procedure							
7.	Confidentiality Policy							
Signat	ture Date	Signature	Date					
Print	Name	Print Name						

*Information is on our website and in our Information Packet. The Information Packet is mailed or given to you directly.

Confidentiality Policy: It is the policy of the Adoption Center for Family Building to respect the privacy and confidentiality of birth parents, adoptive parents and children placed for adoption through this agency. All client information is considered confidential and is to be released only as authorized by the individual.

March 2022