	District Court Juvenile Court					
C	County, Colorado ourt Address:					
In	the Matter of the Adoption of:					
_	Birth Name of Adoptee (If known)					
_	Current Legal Name of Adoptee	▲ COURT USE ONLY ▲				
Α	ttorney or Party Without Attorney (Name and Address):	Case Number:				
	hone Number: E-mail: AX Number: Atty. Reg. #:	Division Courtroom				
	REQUEST FOR ACCESS TO ADOPTIO					
_		a to all adoption records an defined by				
I, _ C.F	, (name) request acces R.S. § 19-1-103(7), in the court's possession, that may include:	s to all adoption records, as defined by				
•	 the adoptee's original and amended birth certificate, 					
	 the Final Decree of Adoption, 					
	the Final Order of Relinquishment, the Order of Targin etting of Reported Births					
	 the Order of Termination of Parental Rights, non-identifying information about the birth parents and adoptee, 	and				
	 identifying information about the birth parents and adoptee. 	und				
1.	Information about the person making the request (Requestor):					
	Name:	Date of Birth:				
	Relationship to Adoptee:	_				
	Street Address:					
	Mailing Address, if different:					
	City: State: Zip Code:	Daytime Phone #:				
	Email Address:	_ Evening Phone #:				
2.	Information regarding the Adoption:					
	Name of Adoptive Parent(s):					
	Date of Adoption (on or about):County					
	Adoptee's Date of Birth:	'				
	·					
3.	I am eligible to have access to the adoption records in this case	because I am:				
	a. ☐The adult adoptee OR ☐His/her legal representative					
	 b. □ An adoptive parent of the minor adoptee OR □ His/her legal representative 					
	c. □ A custodial grandparent of the minor adoptee OR □ His/her le	egal representative				
	d. The spouse or partner in a civil union of the adult adoptee OR AND I have notarized written consent from the adult adoptee or					
	AITU I Have Holanzed Whiteh Consent Holli the addit adopted 0	n proof that the addit adopted is deceased				

	e.	☐ An adult descendant of the adoptee OR ☐ His/her legal representative AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
	f.	☐ An adult sibling or half-sibling of the adult adoptee OR ☐ His/her legal representative AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
	g.	☐ An adoptive parent or grandparent of an adult adoptee OR ☐ His/her legal representative AND ☐ I have notarized written consent from the adult adoptee or proof that the adult adoptee is deceased
	h.	A confidential intermediary <i>and</i> I have attached a copy of the certified order. AND if checked, I have an affidavit from a biological grandparent that a birth parent is deceased.
rec clic ad (dc ori	ceive ck he opte o not ginal	You will be required to provide proof of your identity and establish your relationship to the adoptee to adoption records pursuant to sections 19-5-305(2)(b)(l) and(IV), C.R.S. Ask the court for more details or ere for a list of acceptable forms of identification and documents to establish how you are related to the e. If you are submitting your request by mail, please send <u>copies</u> of these documents to the court for review send originals). The court will destroy the copies after the information has been reviewed. If you send s, you will be responsible for the cost of returning the originals to you by certified mail restricted delivery to that the documents are delivered only to you.
4.	cau	am not one of the individuals listed above in number 3 or do not have the required proof, however, good use exists to allow me to have access to the adoption records pursuant to section 19-1-309, C.R.S. (explain ow). Note: If you checked this box, file the Order (<u>JDF 533</u>) with the Court.
5.	<u> </u>	The provisions of the Indian Child Welfare Act apply to the adoptee as follows:
6.	Wh	en the court locates the adoption records that I am requesting, I request:
	of r	That the court mail the records to me by certified mail restricted delivery (you will be responsible for the cost mailing);
	OR	That the court notify me when the records are available, and I will come to the court in person to inspect
		d/or copy the records (you will be responsible for any copying costs).

VERIFICATION AND ACKNOWLEDGEMENT

I swear/affirm under oath that I have read the foregoing Request and that the statements set forth therein are true and correct to the best of my knowledge.

(Printed name of Requestor)	Signature of Requestor			
Signed and sworn to before me by	in the County of			
, State of	, this	, day of	, 20	
My Commission Expires:		. 0 1. 1		
	Deputy Clerk/Notary Public			
FOR CLERK USE ONLY BELOW THIS LINE (che	ck the boxes below	')		
The requesting party has presented: Identification provided:				
AND				
Documentation establishing his/her relationship t	•	ded:		
If the request was received by mail:				
Copies of the documents described above receive relationship to the adoptee were reviewed and dest documents described above were received from Recertified mail restricted delivery on	royed onequestor, the original	(dates	e). If originals of the	
The certified mail receipt was received by the contracking number:	NOT			
		Clerk Signature	Date	