PROBATE COURT OF	COUNTY, OHIO							
, JUDGE								
ADOPTION OF(Name after a								
CASE NO	doption)							
PETITION TO RECOGNIZE								
[Check applicable boxes, complete blanks, strike inapp documentation]	licable language, and attach supporting							
The Petitioner(s) is/are the adoptive parent(s) of a minor ch Adoption and state that:	ild pursuant to a Foreign Decree or Certificate of							
PETITION	IER(S)							
Petitioner's Full Name:								
Petitioner's Full Name:								
Residence:	·							
Duration of Residence:								
Marital Status:								
Date and Place of Marriage:								
ADOPTED	CHILD							
Name of Child before Adoption:								
Name of Child after Adoption:								
Date and Place of Birth:								
Attached is a certified copy of the child's Birth Certificate, an as to its accuracy by the translator.	d if not in English, also attached is a translation certifie							
A Foreign Decree or Certificate of Adoption in compliance vissued by (Name of Court) day of, 20	vith the laws of the Country of was in Case Number on the							

[Reverse of Form 19.2]

CASE NO.

Attached is a certified copy of the Foreign Decree or Certificate of Adoption which has been verified and approved by the Immigration and Naturalization Service of the United States, and if not in English, also attached is a translation certified as to its accuracy by the translator.

Attached is a fully completed Ohio Department of Health, Division of Vital Statistics, Certificate of Adoption.

The Petitioner(s) state that giving effect to the Foreign Decree or Certificate of Adoption would not violate the public policy of the State of Ohio and respectfully pray for the following Order(s):

☐ An Orde	er that the child's nar	me shall be changed	d to:				
An order 3705.12	r to the Ohio Depart (A)(1)	ment of Health to iss	sue a new b	pirth record for	the adopted perso	n under R.C.	
Other _							
Attorney for	Potitioner			Petitioner			
Allomey for	Petitioner			Petitioner			
Typed or Printed Name				Typed or Printed Name			
Street Address				Petitioner			
City	State	Zip Code		Typed or Printed Name			
Telephone Number (include area code)			Street Address				
Attorney Re	gistration No			City	State	Zip Code	
				Telephone N	lumber (include ar	ea code)	