

AAI REFERENCE FORM FOR ADOPTION

The _____ family has come to this agency seeking approval to adopt a child. One of the requirements we have of our adoptive families is one of obtaining references to support their plans to adopt. We ask that you answer the questions below as truthfully as you can. You can type your answers directly onto this form. Feel free to provide any additional information, comments or concerns you may have with regard to this family. Thank you for your time and prompt attention to this matter.

Name of Person(s) Providing Reference: _____

Address: _____

Telephone Number: _____ Email Address: _____

1. What is your relationship to the above named prospective parent(s)? Select One
2. Where did you meet the prospective adoptive parent(s) and how long have you known them?
3. Have you ever observed the parents in a situation where they were administering discipline to the children? If so, describe.
4. What are your general thoughts about the kind of parent(s) this individual/family might be?
5. Do you know of any reason(s) why we should consider refusing their request for adoption?
If Yes, Please Explain.
6. Do you give this agency permission for a copy of this reference to be sent to the family, their placement agency and/or their adoption attorney? Yes No

Signed: _____ Date: _____

**Please return this form via mail, fax or scan to:
Autumn Adoptions Inc.**

P.O. Box 1204 Lorton, Virginia 22199-1204

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