REPORT OF ADOPTION

NORTH DAKOTA DEPARTMENT OF HEALTH

DIVISION OF VITAL RECORDS

SFN 6739 (4-2010)

CHILD	1. Child - Adoptive Name: (First, Middle, Last)			
INFORMATION ON ADOPTIVE PARENTS	2. Adoptive Mother: (First, Middle, Last)		Full Maiden Name:	
	2a. Birth Date:	2b. Birth Place:		
Needed to Prepare the New Certificate of Birth in the Adoptive Name	2c. Residence at Time of Child's Birth: (State)		2d. County:	
	2e. City or Township:	2f. Inside City Limits: ☐ Yes ☐ No	2g. Street and Number:	
	3. Adoptive Father: (First, Middle, Last)			
	3a. Birth Date:	3b. Birth Place:		
(To be Completed By Attorney or Adoptive Parents)	4. Mailing Address of Adoptive Parents	City	State	ZIP Code
	5a. Check only if "Yes": Is this a Stepparent Adoption? Yes ☐	5b. Check only if "Yes": Is this a Single-Parent Adoption? Yes ☐		
Attorney or Agency and New Certificate Directions	6. Name of Attorney or Placing Agency:			
	Address of Attorney or Placing Agency:	City	State	ZIP Code
Information on Original Birth Certificate	7. Child's Name at Birth: (First, Middle, Last)			
	7a. Sex: ☐ Male ☐ Female	7b. Birth Date:	7c. Birth Place: (City or Township)	
Needed to Locate and Identify Original Birth Certificate	7d. State or Province	7e. County:	7f. Country:	
	8. Mother's Full Maiden Name: (First, Middle, Last)			
(To Be Completed By Clerk of District Court)	9. Father's Name: (First, Middle, Last)			
Certification as to Decree of Adoption and Interlocutory Information	I HEREBY CERTIFY THAT THE ABOVE IDENTIFIED CHILD WAS ADOPTED BY THE ABOVE NAMED ADOPTIVE PARENTS BY A DECREE OF ADOPTION ISSUED ON:			
	Date:			
	Court:			
(To Be Completed By Clerk of District Court)	County: (North Dakota)			
	Is this an Interlocutory Decree? ☐ Yes ☐ No	If so, Show Final Date:		
SEAL	Signature: (Clerk of District Court)			
	Date Reported:			

See Back for Additional Instructions

OVER

INSTRUCTIONS FOR COMPLETION OF REPORT OF ADOPTION

1. Items 1 through 6 - Information concerning the child's adoptive name, the adoptive parents, the attorney or agency, and new certificate authorization - **are to be completed by the attorney or adoptive parents** handling the adoption and filed with the Clerk District Court along with the decree of adoption.

2. Items 7 through 9 - Information needed to locate and identify the original birth certificate - **are to be completed by the Clerk of District Court** from information contained in evidence received and documents supplied with the petition. Such information shall not be disclosed to the adoptive parents unless specifically authorized by the court having jurisdiction.

3. The Clerk of District Court shall certify in the last section of the Report as to the date and place of adoption as decreed by the court and whether or not this is an interlocutory decree. The Clerk of District Court shall sign the Report and affix thereto his official seal.

4. If this Report is being completed for a child born outside North Dakota, the Division of Vital Records will forward the Report to the appropriate vital records office in the state of birth.

5. Mail completed form to: ND Department of Health
   Division of Vital Records
   600 E. Boulevard Ave., Dept. 301
   Bismarck, ND 58505-0200

Current state law provides for a $5 fee for the filing of a new certificate following adoption.
There is an additional fee of $7 for issuing a certified copy of the certificate and each additional copy issued of the same certificate at the same time is $4.