

**Department of Probation
and Child Care –
Sri Lanka**

Annexure – 1

F				
PCC	FA			

General Information about the applicants
(Please indicate "Not Applicable", If Not Relevant)

01.

a. Family name of the adoptive father:

.....

b. First name (S):.....

c. Date of Birth : Day: Month: Year: Age :.....

d. Place of Birth

City:	Country :
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e. Nationality:

f. Family name of the adoptive mother:

.....

g. First name (S):

h. Date of Birth: Day: Month: Year: Age:

i. Place of Birth

City:	Country :
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j. Nationality:

02. Present Address

Address 1 :

Address 2 :

City :

State Province :

Country :

If the country of origin - (d above) and the present address (2 above) are not in the same one, please furnish details in 2 a and 2 b below.

2 (a) Reasons to move from the original country.

2 (b) How long have you been living in the present country?
.....

03. E-mail address:

Country Code

04. Telephone Number:

05. Date of Marriage

5 (a) Do you have children by this marriage : Yes No If
yes, please answer 5(b)

5 (b) Particulars about the said children

<i>NO</i>	<i>Name</i>	<i>Male / Female</i>	<i>Date of Birth</i>

5 (c) Have you adopted any children before: yes No

If yes please answer 5(d)

5 (d)

No	Name	Male / female	Country of origin of the adopted child	Date of Birth	Year of adoption

5 (e) If you have adopted any Sri Lanka Children please give the following information

1. Name of the child :
2. Date of Birth :
3. Date of adoption :
4. File No :
5. Case Number and court :

5 (f) If you have got married more than once please furnish the following information.

- a. How many times you have got married
- b. How many children do you have by the previous marriage / marriages.
- c. Particulars about the children

No	Name	Male / female	Date of Birth	Present custodian of the child concerned

6 Are you applying through an organization? Yes no

a. If yes, name of the organization :

.....

b. Address of the organization:

.....

c. E-mail address of the organization:

.....

d. Telephone number of the organization:

.....

7. Name of the Central Authority of your country

a. Address

.....

b. E-mail address of the Central Authority

.....

c. Telephone Number.....

8. a. Do you intend to adopt a normal child: Yes No

b. Sex and Age of the child to be adopted:

Age:

Sex:

c. If there is a special need child, will you accept this child?

Yes No

d. If so indicate the age and the sex

Age:

Sex:

9. Any other particular you wish to specify

.....
Signature of the male
Applicant

.....
Signature of the female
applicant

Date :

