Report of Adoption

FORM VS-220 Revised 10-2021

INFORMATION FOR AMENDED BIRTH RECORD FOLLOWING ADOPTION

CHILD

1. CHILD'S NAME AFTER ADOPTION (First, Middle, Last)

DO THE PARENTS WISH TO ENROLL THE CHILD IN THE IMMUNIZATION REGISTRY? ☐ Yes ☐ No

PARENTS INFORMATION FOR NEW BIRTH CERTIFICATE

2. MOTHER'S/PARENT I PRESENT NAME (First, Middle, Last)

2a. SEX

2b. LAST NAME PRIOR TO FIRST MARRIAGE

2C. BIRTH DATE (MM/DD/YYYY)

2d. BIRTH PLACE (State)

2e. RACE

2f. SOCIAL SECURITY NUMBER

2g. RESIDENCE - At the time of the child's birth: (Street and number, City, County, State, Zip)

Inside City Limits? ☐ Yes ☐ No

3. CURRENT MAILING ADDRESS OF PARENT(S): (Street and number, City, County, State, Zip)

Inside City Limits? ☐ Yes ☐ No

4. FATHER'S/PARENT II NAME (First, Middle, Last)

4a. SEX

4b. LAST NAME PRIOR TO FIRST MARRIAGE

4c. BIRTH DATE (MM/DD/YYYY)

4d. BIRTH PLACE (State)

4e. RACE

4f. SOCIAL SECURITY NUMBER

5. Was the child born in a foreign country? ☐ Yes ☐ No

5a. Was the child born to U.S. Citizens? ☐ Yes ☐ No

5b. Did the adoption occur in a foreign country? ☐ Yes ☐ No

5c. Are adopting parent's Kansas residents? ☐ Yes ☐ No

6. TYPE OF ADOPTION (select one)

☐ Step-Parent Adoption ☐ Traditional Adoption ☐ Single-Parent Adoption

ATTORNEY

7. NAME OF ATTORNEY:

7a. EMAIL ADDRESS

7b. MAILING ADDRESS OF ATTORNEY: (Street and number, City, State, Zip)

7c. TELEPHONE NUMBER + AREA CODE

Parent(s) Signature (I/We agree that the above information is true and correct to the best of my/our knowledge)

Parent(s) Signature

INFORMATION FROM ORIGINAL BIRTH CERTIFICATE

8. CHILD'S NAME AT BIRTH (First, Middle, Last)

8a. CHILD'S BIRTH DATE (MM/DD/YYYY)

8b. CHILD'S SEX ☐ Male ☐ Female

8c. BIRTH CERTIFICATE NUMBER (if known)

9. CHILD'S BIRTH PLACE: (City, County/Province, State/Country)

10. MOTHER'S/PARENT I NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last)

11. FATHER'S/PARENT II NAME (First, Middle, Last)

CERTIFICATION OF DISTRICT COURT

(Place court seal here)

I hereby certify that the child identified above was adopted by the above-named parent(s) on the

_____ day of _____, _____ in the District Court of _____ County, KS.
(day) (month) (year) (county)

Case Number | Signature of District Court Judge | Date

Kansas Department of Health and Environment
Office of Vital Statistics
1000 SW Jackson Street, Suite 120, Topeka, Kansas 66612

INSTRUCTIONS

Please enter the information requested for each item. This is a permanent record. All information must be typed.

Kansas District Courts are required by state statute (KSA 59-2119) to report adoptions to the Office of Vital Statistics. If the child being adopted was born outside the state of Kansas, the report of adoption will be forwarded to the appropriate state vital statistics office by the Kansas Office of Vital Statistics.

This Report of Adoption and the original Certificate of Live Birth will be sealed and will be opened only by court order or by written request of the adopted person, if of legal age, as directed by KSA 65-2423.

KSA 65-2423 also authorizes, upon request, the registration of birth certificates in the state of Kansas for children born in foreign countries that are not United States citizens born abroad, but adopted by residents of Kansas or adopted in Kansas.

When a Report of Adoption is received, the Office of Vital Statistics contacts the attorney, or adoptive parents, to obtain one or both parents' signatures on the supplemental birth certificate. At that time, we also request the filing fee to prepare and file the new birth record.

If any items are unknown, they may be left blank but will reflect that on the new legal certificate. However, information in items 8 through 10 is needed to locate the original certificate.

You may obtain copies of the new certificate by paying the filing fee to prepare and file the new birth record as well as the current certified copy fee.

For information on fees, please visit our website at http://www.kdheks.gov/vital/amend_record_fees.html or call (785) 296-1436.