Adoption Services Agreement

This Adoption Services Agreement entered into between the ____________________________________________________________________________
Name of County
County Department of Social Services (hereinafter referred to as “Custodial Agency”) and
__________________________________________________________________________________
Name of Child Placing Agency (hereinafter referred to as “Placing Agency”) serves as verification of the adoption services provided on behalf
of _______________________________________________________________________________
Name of Child                                          SIS Number
for her/his adoption by ____________________________________________
Name(s) of Adoptive Parent(s)

Adoption Services Provided

Pre placement services to include recruitment and training of adoptive parent(s) and supervision of adoptive
placement will be provided by:

☐ Placing Agency            ☐ Custodial Agency

Post placement services to include completion of paperwork to facilitate the legal process to finalize this
adoption will be provided by:

☐ Placing Agency            ☐ Custodial Agency

Financial sharing agreement:

$_______ Placing Agency         $_______ Custodial Agency

We, the Custodial Agency and the Placing Agency, agree to the provisions set forth in this agreement and will ONLY
submit invoice(s) for documented adoption services rendered on behalf of above named child.

Custodial Agency                      Placing Agency

Authorized Signature                     Authorized Signature
Print Full Name                                 Print Full Name
Title                                       Title
Date                                        Date

Attachment 1