



Building Connections Across Cultures

Completing this form will provide Pact with information that will be helpful in tailoring your consultation process to your specific needs and questions regarding transracial adoption.

*Each applicant needs to fill out their own form.

PERSONAL INFORMATION

Name _____ Birth surname, if different _____

Address _____

City _____ State _____ Zip _____

Phone (cell) _____ (home) _____ (work) _____

Fax _____ Email _____

Preferred Gender Pronoun _____ DOB (mm/dd/yy) _____ Age _____

Race or ethnicity _____ Citizenship/Nationality _____

Occupation _____ Education _____



pact

an adoption alliance

QUESTIONS ABOUT RACE & ADOPTION

Do you have children? Yes No

Do you have step-children? Yes No

Are any of your children adopted? Yes No

Adopted transracially? Yes No

Tell us about the children in your family so far including how they joined your family (give names and ages)?

Through adoption _____

Through birth _____

Other, describe _____

If you have already adopted children, are any of them of a different race/ethnicity than you are? If yes, what are their races/ethnicities?

Why are you considering adoption?

Why are you considering transracial adoption?

Have you already made the decision to adopt transracially or are you considering other options?



pact

an adoption alliance

Describe your thoughts on the role of race in adoption.

Do you have your heart set on adopting a child of one particular race or ethnicity? Why?

Describe any conditions or characteristics about a child that you could not accept:

Describe your community, including information about its racial and ethnic make-up.

Have you discussed your plans to adopt across racial lines with your close friends and/or family members? What do they think?

Have you discussed your plans to adopt across racial lines with people of color? If yes, who are they and what do they think?
If no, why not?

Do you think you will need different parenting strategies for your child depending on their race?

PERSONAL STATEMENT

What do you hope to learn from a consultation about transracial adoption with Pact? Include your most pressing concerns and/or questions.

SUBMIT FORM

When finished, click Submit button to submit form.

SUBMIT