

Request for Information from Adoption File			
Please provide as much of the following as is available to you. This will assist the Clerk of the Court in determining if your adoption was filed in St. Clair County, Illinois and what information can be released to you.			
Adoptee Information			
Current Name		Current Address	
Adopted Name			
Birth Name		Daytime Telephone Number	
Date of Birth	Place of Birth	Adoption Case Number	Date of Adoption
Adoptive Parent Information			
Name of Adoptive Father		Name of Adoptive Mother	
Date of Birth	Date of Death	Date of Birth	Date of Death
Current Address		Current Address	
Daytime Telephone Number		Daytime Telephone Number	
Birth Family Information			
Name of Birth Father		Name of Birth Mother	
Current Address		Current Address	
Daytime Telephone Number		Daytime Telephone Number	
Request for Release of Information			
My involvement in this is: ☐ I am the adoptee ☐ I am an adoptive parent ☐ I am a birth parent ☐ Other:		I request the release of the following: ☐ Copy of court file ☐ A certified copy of the Judgment of Adoption ☐ A copy of the Order Terminating Parental Rights ☐ A copy of adoptee's original birth certificate ☐ Other:	
Reason for Requesting Release of Information			
A photocopy of your government issued photo ID must be attached. Other documentation may be required.		Date	Signature
FOR USE BY COURT			
Date Received	☐ No file in this Court ☐ Court Appearance Required ☐ Special GAL Appointed	Notes	