



A GUIDE TO ADULT ADOPTION

ADULT ADOPTION

FAMILY COURT OF THE STATE OF DELAWARE

<https://courts.delaware.gov/family/>

Family Court Contact Information

New Castle County

Leonard L. Williams
Justice Center
500 N. King Street
Wilmington, DE 19801
302-255-0300

Kent County

Family Courthouse
400 Court Street
Dover, DE 19901
302-672-1000

Sussex County

Family Courthouse
22 The Circle
Georgetown, DE 19947
302-855-7400

All Family Court Forms, FAQs, Filing Instruction Packets, and additional information can be found on the Family Court Website at: <https://courts.delaware.gov/family/>

Who may adopt an adult?

Any person, any husband and wife jointly, or an unmarried couple petitioning jointly provided they are cohabitating (as the term is defined in Section 1512 of Title 13) who wants to adopt any person over the age of 18 may file a Petition for Adoption of an Adult with the Family Court.

Where do I file my petition?

You should file your petition in the county in which the Petitioner(s) or the person to be adopted lives.

What forms do I need to file?

You should file the following forms:

- Form 150A - Petition for Adoption of an Adult
- Form 240 - Information Sheet
- Form 149 - Affidavit of Consent of Petitioner(s) in Adult Adoption
- Form 153 - Affidavit of Consent of Adoptee in Adult Adoption
- Form 164 - Order for Hearing on Petition for Adoption of an Adult
- Form 152A - Final Order of Adult Adoption

You must also file a certified copy of the adoptee's birth certificate.

Do I have to appear in Court?

Yes. After you file the Petition for Adoption of an Adult, you will be scheduled for a Court Hearing. The purpose of this hearing is to make sure that both parties consent to the adoption and understand the effects of the adoption.

After this hearing, the Court may render a decree ordering the issuance of a certificate of adoption.

Does the adoptee have to change their name?

The adoptee is not required to change their name, but if they wish to do so, may indicate that on the Petition for Adoption of an Adult. Ensure that you include the full legal name you are requesting for the adoptee.

Please note that the Court cannot change the gender designation of an adoptee as a result of the adoption. However, both Delaware's Office of Vital Statistics and Department of Motor Vehicles provide a process by which an individual can change their gender designation. Please refer to each agency for additional information.

What are the effects of an Adult Adoption?

Delaware Code provides that upon the issuance of the decree of adoption, all the legal duties, rights, privileges, and obligations that exist between a parent and child now exist between the Petitioner(s) and adoptee(s). These include, but are not limited to, the duty to support and inheritance rights. **Adult adoptees and those seeking to adopt an adult should discuss the collateral legal consequences of adult adoption with an attorney.**

If the adult adoptee was born in Delaware, will Family Court order the Delaware Office of Vital Statistics to change the adult adoptee's birth certificate?

In an adult adoption, the Court does not typically order a change to or removal of birth parents from the birth certificate. If the adult adoptee has a Delaware birth certificate, the only change Family Court will order the Delaware Office of Vital Statistics (OVS) to make is to the adult adoptee's name. This is done once the Court has entered an order changing the adult adoptee's legal name. The adoptee may request a new birth certificate from OVS. There is a fee for the new birth certificate. If an adoptee was born outside of Delaware, the parties may provide a copy of the adoption order and certificate to the applicable out-of-state OVS.

How can I file my petition and related paperwork?

Petitions and papers may be filed at or mailed to the Family Court in each county. Family Court also now accepts petitions and papers by email. To file your petition by email, you must send the petition and all required forms to: FC_CDN_TPR_Adoption@delaware.gov

****Before filing by email, please review the Civil Filing by Email FAQ:**

<https://courts.delaware.gov/family/faqs>



The Family Court of the State of Delaware

In and For New Castle County Kent County Sussex County

PETITION FOR ADOPTION OF AN ADULT

In the Matter of: _____

File Number: _____

<u>Petitioner</u>
Name: _____
Street Address: _____
Apartment: _____
P.O. Box Number: _____
City/State/Zip Code: _____
Phone Number: _____
Attorney Name: _____
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single
Interpreter needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Language: _____

<u>2nd Petitioner (if any)</u>
Name: _____
Street Address: _____
Apartment: _____
P.O. Box Number: _____
City/State/Zip Code: _____
Phone Number: _____
Attorney Name: _____
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single
Interpreter needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Language: _____

In the interest of the following person:

Name: _____
Date of Birth: _____
Gender: (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female

1. The Petitioner(s) desire to adopt the above-named person (hereinafter the "adoptee"). As such, I/we have attached the following to this petition:
 Consent of Petitioner(s) to Adult Adoption
2. The adoptee consents to being adopted by the Petitioner(s). As such, I/we have attached the following to this petition:
 Consent of Adoptee to Adult Adoption
3. I/we have attached a certified copy of the adoptee's birth certificate.

Only complete if requesting a name change for the adoptee.

4. The adoptee will assume the following name(s) upon adoption (include the full legal name requested):

NOTICE: The record of an adult adoption is the Family Court certificate of adoption and order.
The Court does not order the removal of birth parents from birth certificates
as a result of an adult adoption.

WHEREFORE, Petitioner(s) seeks to adopt the above-named individual.

Petitioner/Petitioner's Attorney Print Petitioner/Petitioner's Attorney Sign Date

Sworn to and subscribed before me this _____ day of _____, _____.

Clerk of Court/Notary Public Print Clerk of Court/Notary Public Sign

2nd Petitioner (if any) Print 2nd Petitioner (if any) Sign Date

Sworn to and subscribed before me this _____ day of _____, _____.

Clerk of Court/Notary Public Print Clerk of Court/Notary Public Sign

AFFIDAVIT OF TRUTH

I, _____, state the information in this Petition for Adoption is true and correct to the best of my knowledge.

Affiant

Sworn to and subscribed before me this _____ day of _____, _____.

Clerk of Court/Notary Public



The Family Court of the State of Delaware

INFORMATION SHEET – PLEASE PRINT

the date you
file the form

Date: 12/13/2017

File Number: CN-99999

Enter the file
number if you
know it, if not,
leave blank.

**Please fill in A to M pertaining to you, the Applicant/Petitioner.
(For additional petitioners, use additional sheets.)
PLEASE PRINT CLEARLY**

A. Name: Anne C. Smith

B. Address: 101 Oak Street, Apartment 123

City/State/Zip Code: Dover, DE 19901

C. Phone: Home - 302-555-1111 Work - 302-555-9999 Cell - 302-999-8888

D. Email Address: anne.c.smith@example.com

I authorize Family Court to deliver court orders in my case(s) to my email address instead of my mailing address.

**If you check this box, you are authorizing
the Court to send you notices by email.**

*Please note that if you **You will not receive notices in regular mail.** in your pending civil cases in Family Court will be sent in an encrypted email via Egress to the email address provided and will not be mailed to your physical address. For information on how to receive encrypted emails through Egress, please visit:

<https://judicial.state.de.us/courtdox/Download.aspx?id=94888&court=readonly>

E. Employer & Address: ABC Child Care Center

500 Pine Street

Dover, DE 19904

Hours/Shift: Monday – Friday 7:00am-5:00pm

F. Social Security Number: 000-00-0000 G. Date of Birth: 02/03/1986

H. Place of Birth (City & State): Wilmington, DE

I. Sex: F Race: BR Height: 5ft 9in Weight: 130lb Hair: brown Eyes: blue

Marks/Scars/Tattoos: N/A

J. Type of motor vehicle operated by you: Honda Accord

K. Driver's License Number: 1234567 State of Issue: DE Expiration Date: 02/03/2027

L. Your relationship to the Defendant/Respondent: sister

M. Attorney: N/A

Please fill out the information below in reference to the child(ren) who are involved.

Children						
Name	Relationship	Sex	Race	Date of Birth	Social Security Number	Place of Birth (City & State)
Douglas Harding	nephew	M	white	10/14/2012	987-65-4321	Newark, DE

**Please fill in N to AC pertaining to the Defendant/Respondent.
(For additional respondents, use additional sheets.)**

N. Defendant/Respondent is a (check one): ADULT JUVENILE

O. Name: Michelle Jones

P. Address: 6 Walnut Street, Apartment D

City/State/Zip Code: Newark, DE 19711

You must complete a separate form for each Defendant/Respondent.

Q. Phone: Home - N/A Work - N/A Cell - 302-222-3333

R. Email Address: michellejones@example.com

S. Employer & Address: N/A

Hours/Shift: N/A

T. Social Security Number: unknown U. Date of Birth: 05/01/1989

V. Place of Birth (City & State): Wilmington, DE

W. Relationship to Child: Not Applicable Mother Father Relative Non-Relative
 Other (please describe): _____

X. Sex: F Race: BR Height: 5ft Weight: 130lb Hair: brown Eyes: brown
Marks/Scars/Tattoos: Hello Kitty tattoo on upper right arm

Y. Driver's License Number: unknown State of Issue: unknown

Z. Type of vehicle operated by Defendant/Respondent: Ford - pickup

AA. Parent's Name (if a juvenile): N/A

AB. Time when Respondent is usually home: unknown

AC. Additional information about Respondent that may aid the process server in locating him/her to serve petition.

If you are unable to locate the respondent at her residence, she spends a lot of time with her boyfriend at 775 Spruce Street, Middletown, DE 19765.

List places where the Defendant/Respondent spends time other than home. The more information, the better.

DIRECTIONS TO RESPONDENT'S RESIDENCE

home: west on Talbot, right on Walnut, brown apartment building #6, apartment D

boyfriend: 898 south to 301, turn left to Spruce, white house on left

Write directions to each address listed on the form to make sure that the process server can locate the Defendant/Respondent.



The Family Court of the State of Delaware

INFORMATION SHEET – PLEASE PRINT

Date: _____ File Number: _____

**Please fill in A to M pertaining to you, the Applicant/Petitioner.
(For additional petitioners, use additional sheets.)
PLEASE PRINT CLEARLY**

A. Name: _____

B. Address: _____
City/State/Zip Code: _____

C. Phone: Home - _____ Work - _____ Cell - _____

D. Email Address: _____

I authorize Family Court to deliver court orders in my case(s) to my email address instead of my mailing address.*

*Please note that if you checked the email authorization box, all orders in your pending civil cases in Family Court will be sent in an encrypted email via Egress to the email address provided and will not be mailed to your physical address. For information on how to receive encrypted emails through Egress, please visit:

<https://judicial.state.de.us/courtdox/Download.aspx?id=94888&court=readonly>

E. Employer & Address: _____

Hours/Shift: _____

F. Social Security Number: _____ G. Date of Birth: _____

H. Place of Birth (City & State): _____

I. Sex: _____ Race: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____
Marks/Scars/Tattoos: _____

J. Type of motor vehicle operated by you: _____

K. Driver's License Number: _____ State of Issue: _____ Expiration Date: _____

L. Your relationship to the Defendant/Respondent: _____

M. Attorney: _____

Please fill out the information below in reference to the child(ren) who are involved.

Children						
Name	Relationship	Sex	Race	Date of Birth	Social Security Number	Place of Birth (City & State)

**Please fill in N to AC pertaining to the Defendant/Respondent.
(For additional respondents, use additional sheets.)**

N. Defendant/Respondent is a (check one): ADULT JUVENILE

O. Name: _____

P. Address: _____
City/State/Zip Code: _____

Q. Phone: Home - _____ Work - _____ Cell - _____

R. Email Address: _____

S. Employer & Address: _____

Hours/Shift: _____

T. Social Security Number: _____ U. Date of Birth: _____

V. Place of Birth (City & State): _____

W. Relationship to Child: Not Applicable Mother Father Relative Non-Relative
 Other (please describe): _____

X. Sex: _____ Race: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____
Marks/Scars/Tattoos: _____

Y. Driver's License Number: _____ State of Issue: _____

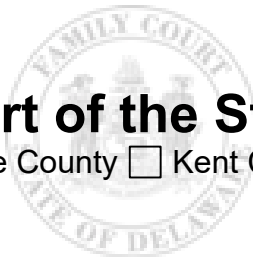
Z. Type of vehicle operated by Defendant/Respondent: _____

AA. Parent's Name (if a juvenile): _____

AB. Time when Respondent is usually home: _____

AC. Additional information about Respondent that may aid the process server in locating him/her to serve petition.

DIRECTIONS TO RESPONDENT'S RESIDENCE



The Family Court of the State of Delaware

In and For New Castle County Kent County Sussex County

In the Matter of: _____)
 _____)
 _____) File Number: _____)
 Date of Birth: _____)
 _____)

AFFIDAVIT OF CONSENT OF ADOPTEE IN ADULT ADOPTION

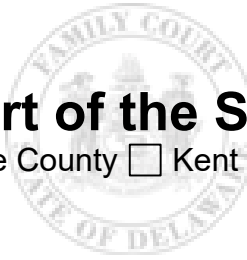
I, _____, hereby give my consent for _____ to adopt me.

_____ Date

_____ Consenting Party

Sworn to and subscribed before me this _____ day of _____, _____.

Clerk of Court/Notary Public



The Family Court of the State of Delaware

In and For New Castle County Kent County Sussex County

_____,)
 Petitioner)
 _____,)
 Adult Adoptee)
)

File Number: _____

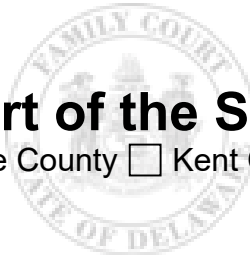
ORDER FOR HEARING ON PETITION FOR ADOPTION OF AN ADULT

AND NOW, TO WIT, the foregoing Petition for Adult Adoption having been read and considered,

IT IS ORDERED that the above matter be set down for a hearing on _____
at _____ in courtroom _____ **OR** on Zoom at which time the Petitioner(s) and
Adoptee shall appear to establish both Petitioner(s) and the Adoptee consent to the adoption. A copy
of this Order shall constitute notice of the hearing date, time, and place.

Date

Judge



The Family Court of the State of Delaware

In and For New Castle County Kent County Sussex County

)

In the Matter of:)

)

Name: _____) File Number: _____

Date of Birth: _____)

Gender: (choose one) Male Female)

)

FINAL ORDER OF ADULT ADOPTION

And now, this _____ day of _____, _____ it appearing that
 _____ has petitioned the Court to be allowed to
 adopt _____ born on _____.

The records indicate that all statutory requirements have been met;

It is ordered that _____ shall be the
 adoptee of _____ for all legal intents and purposes,
 and adoptee shall henceforth be known as _____
(full legal name to be listed on birth certificate)

This is or is not a name change.

Judge