The Family Court of the State of Delaware

In and For  New Castle  Kent  Sussex County

**PETITION FOR ADOPTION OF AN ADULT**

|  |  |
| --- | --- |
| In the Matter of: |  |

## Petitioner 2nd Petitioner (if any)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | Name |  | File Number |
|  |  |  |  |  |
| Street Address |  | Street Address |  |  |
|  |  |  |  |  |
| P.O. Box Number |  | P.O. Box Number |  | |
|  |  |  |  | |
| City/State/Zip Code |  | City/State/Zip Code |  | |
|  |  |  |  | |
| Phone Number |  | Phone Number |  | |
|  |  |  |  | |
| Attorney Name |  | Attorney Name |  | |
|  |  |  |  | |
| Marital Status: Married Single |  | Marital Status: Married Single |  | |
| Interpreter needed?  Yes  No |  | Interpreter needed?  Yes  No |  | |
| Language |  | Language |  | |

In the interest of the following person:

|  |  |  |
| --- | --- | --- |
| Name | Date of Birth | Gender  (Check One) |
|  |  | Male  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

1. 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

1. The adoptee will assume the following name(s) upon adoption:

|  |
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|  |

1. I/we have attached a certified copy of the adoptee’s birth certificate.

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

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Petitioner/Petitioner’s Attorney | | |  | Petitioner 2, *if any* | | |
|  | | | | | | |
| Date | | |  | Date | | |
| Sworn to and subscribed before me this | | | Sworn to and subscribed before me this | | |
|  | day of |  |  | day of |  |
|  | | |  | | |
| Clerk of Court/ Notary Public | | | Clerk of Court/ Notary Public | | |

**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 subscribed before me this |  | day of | |  | , |
|  | | | | | |
|  | | | Clerk of Court/ Notary Public | | |