

**PRIVATE CHECKLIST FOR INITIAL ADOPTION SUBSIDY REQUEST PACKET**

IN ORDER FOR THE ADOPTION SUBSIDY COORDINATOR TO PROCESS THE APPLICATION FOR SUBSIDY, THE FOLLOWING DOCUMENTS AND INFORMATION MUST BE (CHECKED) AND ALL INFORMATION MUST BE SUBMITTED.

Child’s Full Adoptive Name: Click here to enter text.

Child’s Birth Name: Click here to enter text. Court Date: Click here to enter text.

**THE FOLLOWING DOCUMENTS AND INFORMATION (CHECKED) ARE ATTACHED:**

- CFS-425 Application for Adoption Subsidy
- CFS-427 Determination of Eligibility for Adoption Subsidy
- Adoption Subsidy Family Profile (THIS IS A NARRATIVE REPORT ABOUT THE ADOPTIVE FAMILY WHICH NEEDS TO BE PREPARED BY THE ADOPTION AGENCY. ENCLOSED IS A COPY OF WHAT NEEDS TO BE OUTLINED IN THIS REPORT.)
- Documentation to Support Child’s Special Needs (PLEASE ATTACH EVALUATIONS, DOCUMENTATION FROM A PHYSICIAN ETC. IF THE CHILD IS DIAGNOSED WITH A SERIOUS CONDITION; DOCUMENTATION FROM A MEDICAL PROFESSIONAL MUST BE CURRENT WITHIN ONE YEAR.)
- Approved Home Study
- Copy of the Original Notice of Child’s SSI Eligibility (AWARD LETTER)
- A description of efforts to place the child without providing a subsidy (THIS IS TO BE PREPARED BY THE ADOPTION AGENCY)
- Documentation of compliance with the Interstate Compact on the Placement of children (ICPC), (IF THE CHILD IS NOT FROM ARKANSAS)
- Central Registry Check, Criminal Record Check, non-state criminal record FBI check, and all other required checks
- Petition for Guardianship
- Guardianship Order
- Parental Consent/**Relinquishment and Termination of Parental Rights Order**

SUBMITTED BY: \_\_\_\_\_  
ADOPTION SPECIALIST SIGNATURE DATE

\_\_\_\_\_  
SUPERVISOR SIGNATURE DATE

MY SIGNATURE INDICATES THAT I HAVE CHECKED AND PROVIDED ALL DOCUMENTATION REQUIRED TO PROCESS A SUBSIDY.

**Central Office Use Only**

APPROVED

DENIED

TABLED

Approved by: \_\_\_\_\_  
Subsidy Coordinator Date