



REPORT OF ADOPTION
 DEPARTMENT OF HEALTH AND HUMAN SERVICES
 VITAL RECORDS UNIT
 SFN 6739 (10-2022)

INFORMATION ON ADOPTIVE PARENTS Provide all information for both parents, even for stepparent adoptions Enter information as it is to appear on new birth record To be Completed by Attorney or Adoptive Parents	1. Adoptive Mother (First, Middle, Last)		Full Maiden Name		
	1a. Birth Date		1b. Birth Place		
	1c. Street Address at Time of Child's Birth			1d. City or Township	
	1e. County		1f. Inside City Limits <input type="checkbox"/> Yes <input type="checkbox"/> No	1g. State	
	2. Adoptive Father (First, Middle, Last)				
	2a. Birth Date		2b. Birth Place		
	3. Current Address of Adoptive Parents		City	State	ZIP Code
4a. Check only if "Yes" Is this a stepparent adoption? Yes <input type="checkbox"/>		4b. Check only if "Yes" Is this a single parent adoption? Yes <input type="checkbox"/>			
Attorney or Agency	5. Name of Attorney or Placing Agency			Mail Birth Certificate To <input type="checkbox"/> Attorney <input type="checkbox"/> Parent	
	Address of Attorney or Placing Agency		City	State	ZIP Code
Information on Original Birth Certificate Needed to Locate Original Birth Certificate To Be Completed by Clerk of District Court	6. Child's Name at Birth (First, Middle, Last)				
	6a. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	6b. Birth Date	6c. Birth Place (City or Township)		
	6d. State or Province		6e. County	6f. Country	
	7. Mother's Full Maiden Name (First, Middle, Last)				
	8. Father's Full Name (First, Middle, Last)				
Certification as to Decree of Adoption and Interlocutory Information Original Signed Report Must be Mailed In To Be Completed by Clerk of District Court	I HEREBY CERTIFY THAT THE ABOVE IDENTIFIED CHILD WAS ADOPTED BY THE ABOVE NAMED ADOPTIVE PARENTS AND THAT THE COURT HAS DECREED THE CHILD'S NAME TO BE:				
	First	Middle		Last	
	Date				
	Court				
	County		State		
	Is this an Interlocutory Decree? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Show Final Date		
SEAL	Signature (Clerk of District Court)				
	Date Signed				

Mail this Original Report to: Vital Records, 600 E Boulevard Ave, Dept 325, Bismarck, ND 58505-0250

See Back for Additional Instructions

OVER

INSTRUCTIONS FOR COMPLETION OF REPORT OF ADOPTION

1. Items 1 through 5 - Information concerning the adoptive parents, the attorney or agency - **are to be completed by the attorney, agency or adoptive parents** handling the adoption and filed with the Clerk District Court along with the decree of adoption.
2. Items 6 through 8 - Information needed to locate and identify the original birth record - **are to be completed by the Clerk of District Court** from information contained in evidence received and documents supplied with the petition. Such information shall not be disclosed to the adoptive parents unless specifically authorized by the court having jurisdiction.
3. The Clerk of District Court shall certify in the last section of the Report as to the child's full name, date and place of adoption as decreed by the court and whether or not this is an interlocutory decree. The Clerk of District Court shall sign and date the Report and affix the court's seal.
4. If this Report is being completed for a child born outside North Dakota, Vital Records will forward the Report to the appropriate vital records office in the state of birth. Our office does not charge a fee to forward the Report to the appropriate vital records office; however, we suggest the attorney, agency or adoptive parents handling the adoption contact the vital records office in the state of the birth regarding their fees and requirements to file the new birth record.
5. Mail **Original** completed form to:
ND Department of Health and Human Services
Vital Records
600 E. Boulevard Ave., Dept. 325
Bismarck, ND 58505-0250

Submit the \$15 fee to file a new birth record following adoption along with the Report of Adoption. There is an additional \$15 fee for issuing a certified copy of the birth certificate.

If fees are not included with the Report of Adoption submitted to our office from the court, the Request for Certified Copy of a Birth Record (SFN 8140) must be completed by the adopted parents listing the adopted information to receive the updated birth certificate.