Adoptions & Family Support Network, Inc.

2210 US 41 Schererville, IN 46375 Phone: 219-924-2600; 219-689-6789

Mail correspondence to: P.O. Box 420 St. John, IN 46373

www.adoptionandfamily.com * adoptionandfamily@att.net

SERVICES AND FEES

(All fees are non-refundable.)

Application Fee (to be submitted with application)			275		
Background Check Only Services (assistance with getting 4 background checks done)			75		
Note: This is a fee-for-service only	nent Fee for Indiana Residents (due before home visit) and does not guarantee a favorable home study ne year, your home study must be updated.				
1	*Domestic	\$ 1	1,000		
	Step-parent	\$	625		
	Addendum	\$	100		
	One year update	\$	575		
requirements by the placement agence	nother agency has to be contacted and there are specific home study cy, state, or country, an extra fee is charged for the additional agency and prepare the home study report per their requirements.	\$	150		
when match made by this agency			\$10,000		
when match made by adoptive family (\$2000 retainer due when birthparent services begin)			\$ 5,000		
additional charge for ICPC	if out of state adoption	\$	2,000		
Post-Placement Services (due	e at visit) fee per visit/report	\$	350		
Other Fees:					
Travel reimbursement for mileage	•	\$ \$		per mile	
Expedited home study report (if needs to be completed less than 2 weeks after home visit)			200.00		
Extra copy of home study or copy of a report/document			25.00		
Counseling services			\$ 80.00 per hour		

^{*}Reduced home study fees are available for relative adoptions if a financial need is determined upon receipt of the home study application. Please talk to your adoption worker for further information.

I/We understand that <u>all fees are non-refundable</u> and consent to the services at the above stated fees. I/We understand that the adoption cannot take place until all fees are paid as agreed. I/We understand that expenses may incur which are not listed on this agreement, such as criminal history checks, attorney fees, medical expenses, birth parent expenses (up to \$3000). In addition, I/we will secure the services of an adoption attorney prior to a placement and provide Adoptions & Family Support Network, Inc. with the contact information. I/We understand that the placement of a child with me/us cannot occur until the home study has been completed and approved by Adoptions & Family Support Network, Inc. The post-placement studies must find the placement satisfactory and any costs must be fully paid before this agency can recommend finalization of the adoption. I/We agree to notify Adoptions & Family Support Network, Inc. when there is a significant change in my family circumstances during the home study and adoption process. As guardian of the child, Adoptions & Family Support Network, Inc. reserves the right to remove the child from me/us at any point during the post-placement period if it becomes necessary to protect the best interest of the child. I/We will not attempt to see the child referred to me/us on our own until consents for adoption have been signed (unless permission is given by birth parent and/or arranged by this agency).

Printed name of adoption applicants:
Signature of adoption applicants:
Date:
Signature of adoption worker:
Date: