

Adoptions & Family Support Network, Inc.

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

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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) \$ 100

Home Study Family Assessment Fee for Indiana Residents (due before home visit)

Note: This is a fee-for-service only and does not guarantee a favorable home study or the placement of a child. After one year, your home study must be updated.

*Domestic \$ 1,225

Step-parent \$ 725

Addendum \$ 125

One year update \$ 575

Coordination of Services Fee – (due with home study fee)

During the home study process, if another agency has to be contacted and there are specific home study requirements by the placement agency, state, or country, an extra fee is charged for the additional time to communicate with the other agency and prepare the home study report per their requirements.

\$ 150

Adoption Placement Services Fee - domestic

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 at visit) fee per visit/report \$ 400

Other Fees:

Travel reimbursement for mileage over 80 miles round trip \$.75 per mile

Expedited home study report (if needs to be completed less than 2 weeks after home visit) \$ 250.00

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.*

FEE AGREEMENT

I/We understand that **all fees are non-refundable** 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.

I/We understand that if this agency places a child in my home, they are the guardian of the child and they reserve 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 applicant 1: _____

Signature of adoption applicant 1: _____

Date: _____

Printed name of adoption applicant 2: _____

Signature of adoption applicant 2: _____

Date: _____

Signature of adoption worker: _____

Date: _____