

**PROBATE COURT OF HURO COUNTY, OHIO**

**TIMOTHY L. CARDWELL, JUDGE**

**IN THE MATTER OF THE ADOPTION OF** \_\_\_\_\_

(Name after adoption)

**CASE NO.** \_\_\_\_\_

**PETITION FOR ADOPTION OF ADULT**

**[R.C. 3107.02]**

The undersigned respectfully petitions the court for permission to adopt \_\_\_\_\_  
an adult and to have the adult's name changed to \_\_\_\_\_.

The Petitioner may adopt because the adult:

- is totally and permanently disabled.
- is determined to be a person with a developmental disability under R.C. 5123.01.
- had established a child-foster caregiver, kinship caregiver, or child-stepparent relationship with the petitioner as a minor.
- was, at the time of the adult's eighteenth birthday, in the permanent custody of or in a planned permanent living arrangement with a public children services agency or a private child placing agency
- is the child of the spouse of the petitioner.

The undersigned states that:

- neither parent of the adult is obligated to pay child support or cash medical support for the adult adoptee.
- one or more of the adult's parents is obligated to pay child support or cash medical support for the adult adoptee through the \_\_\_\_\_ County Child Support Enforcement Agency.

\_\_\_\_\_  
Attorney for Petitioner

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
Telephone Number (include area code)

CASE NO. \_\_\_\_\_

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

Attorney Registration No. \_\_\_\_\_

**ENTRY**

This cause is set for hearing on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_  
at \_\_\_\_\_ .M.

\_\_\_\_\_  
PROBATE JUDGE