

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address): NAME: STREET ADDRESS: CITY, STATE, ZIP: TELEPHONE NO: FAX NO. (Optional): EMAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
<p>SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ 1 Second Street, Room 300 Watsonville, CA 95076 Watsonville Branch</p>	
IN THE MATTER OF THE PETITION OF:	CASE NUMBER:
<p align="center">PETITION FOR AUTHORIZATION TO INSPECT ADOPTION AND BIRTH RECORD INFORMATION AND TO OBTAIN COPIES (TRANSMITTAL FAMILY CODE § 9200 AND HEALTH AND SAFETY CODE § 10275)</p>	

I am the Petitioner and submit the following:

1. Mailing address: _____
2. Residence address: _____, County of _____
3. Telephone number: _____ Birth date: ____/____/____, and my current age _____
4. I am informed (*check one*):

a. and believe that I was adopted by _____ (*adopting parent(s)*) on or about (*date*) _____, in the County of Santa Cruz.

b. that an adoption proceeding related to _____ (*adoptee*) was completed in the County of _____, on or about _____ by _____ (*adopting parents*).

5. (Family Code §9200) I request permission to inspect the records and/or obtain copies of the records contained in the court file relating to the adoptee _____, for the following reasons:
(Family Code §9200 requires a showing of exceptional circumstances and good cause approaching the necessitous.)

6. (Health and Safety Code §102705) I request permission to inspect and/or copy the original birth record contained in the State Department of Social Services files for the following reasons:

(Health and Safety Code §102705 requires a showing of necessity of the order and good and compelling cause. The name and address of the natural parents shall be given to the petitioner only if he or she can demonstrate that the name and address, or either of them, are necessary to assist him or her in establishing a legal right.)

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7. I request that the court confirm the dates that I was a Dependent in the Santa Cruz Superior Court system for the following reasons:

8. For the reasons stated, I request permission to obtain to inspect a copy of the following document(s)

9. Attached is a copy of a government issued current photographic identification card of the Petitioner.

I request an order of the Superior Court as required by Family Code §9200 and/or Health and Safety Code §102705 with respect to the records relating to the above proceeding.

Date:

Print Name

Signature of Petitioner or Attorney for Petitioner

VERIFICATION

I am the Petitioner in the above matter. I have read this petition and I know and understand what it states. I declare that the petition is true based upon my own personal knowledge, except as to those matters where it is stated to be based upon my information and belief, and as to those matters, I believe them to be true.

Date:

Print Name

Signature of Petitioner

California Family Code Section 9200

(a) The petition, relinquishment or consent, agreement, order, report to the court from any investigating agency, and any power of attorney and disposition filed in the office of the clerk of the court pursuant to this part is not open to inspection by any person other than the parties to the proceeding and their attorneys and the department, except upon the written authority of the judge of the superior court. A judge of the superior court may not authorize any one to inspect the petition, relinquishment or consent, agreement, order, report to the court from any investigating agency, or power of attorney or deposition or any portion of any of these documents, except in exceptional circumstances and for good cause approaching the necessitous. The petitioner may be required to pay the expenses for preparing the copies of the documents to be inspected.

(b) Upon written request of any party to the proceeding and upon the order of any judge of the superior court, the clerk of the court shall not provide any documents referred to in this section for inspection or copying to any other person, unless the name of the child's birth parents or any information tending to identify the child's birth parents is deleted from the documents or copies thereof.

(c) Upon the request of the adoptive parents or the child, a clerk of the court may issue a certificate of adoption that states the date and place of adoption, the child's birth date, the names of the adoptive parents, and the name the child has taken. Unless the child has been adopted by a stepparent, the certificate shall not state the name of the child's birth parents.

California Health and Safety Code Section 102705

All records and information specified in this article, other than the newly issued birth certificate, shall be available only upon the order of the superior court of the county of residence of the adopted child or the superior court of the county granting the order of adoption.

No such order shall be granted by the superior court unless a verified petition setting forth facts showing the necessity of the order has been presented to the court and good and compelling cause is shown for the granting of the order. The clerk of the superior court shall send a copy of the petition to the State Department of Social Services and the department shall send a copy of all records and information it has concerning the adopted person with the name and address of the natural parents removed to the court. The court must review these records before making an order and the order should so state. If the petition is by or on behalf of an adopted child who has attained majority, these facts shall be given great weight, but the granting of any petition is solely within the sound discretion of the court. The name and address of the natural parents shall be given to the petitioner only if he or she can demonstrate that the name and address, or either of them, are necessary to assist him or her in establishing a legal right.

TRANSMITTAL

TO BE COMPLETED AND SENT BY THE CLERK OF THE COURT TO SACRAMENTO
ONLY IF PARAGRAPH SIX (6) OF THE PETITION HAS BEEN MARKED
(Health and Safety Code § 102705)

State Department of Social Services
Adoptions Branch
744 P Street, M/S 19-31
Sacramento, CA 95814

To California State D.S.S.:

The Original Petition seeking original birth records pursuant to Health and Safety Code § 102705 was filed in the Santa Cruz County Superior Court on _____ in Case Number _____.

Please comply with Health and Safety Code section 102705 by sending a copy of all records and information it has concerning the adopted person _____ with the name and address of the natural parents removed, to:

Santa Cruz County Superior Court,
Attention: Adoptions Clerk
1 Second Street
Room 300
Watsonville, California 95076

Executive Officer/Clerk of the Superior Court of Santa Cruz County

Date:

Deputy Clerk

(A copy of this request was sent by the Clerk of the Court to the Department of Social Services on _____)

To be completed by Court Staff:

<p>To Judge of the Superior Court:</p> <p>Attached are the <input type="checkbox"/> records <input type="checkbox"/> letter received by the Clerk of the Court from the State Department of Social Services after transmission of a copy of the attached verified petition to said department.</p> <p>Executive Officer/Clerk of the Superior Court of Santa Cruz County</p> <p>Date: _____</p> <p>_____ Deputy Clerk</p>	<p><i>FOR COURT USE ONLY</i></p>
<p>COURT ORDER</p>	<p>CASE NUMBER: _____</p>
<p>The Court, having reviewed all of the attached records received from the State Department of Social Services and the foregoing verified petition and finding that good and compelling cause existed to review said records, now makes the following ORDER:</p> <p><input type="checkbox"/> ORDERED that the Petition is GRANTED and that the Bureau of Vital Statistics shall furnish Petitioner, with a copy of the original birth record, upon payment of fees required by law.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> ORDERED that the Petition is DENIED as exceptional circumstances and good cause has not been shown for the release or inspection of said documents.</p> <p><input type="checkbox"/> ORDERED that the Petition is DENIED because no record was located. See attached letter from Department of Social Services.</p> <p><input type="checkbox"/> ORDERED that the Petition is DENIED for the following reasons: _____</p> <p>_____</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> The Court needs additional information to decide whether to grant your request. You must go to the Court Hearing date listed below:</p> <p>Date: _____</p> <p>Time: _____</p> <p>Dept: _____</p> <p style="text-align: right; margin-right: 100px;">Court Location: Superior Court of California, County of Santa Cruz 1 Second Street Watsonville, CA 95076</p> <p>IT IS SO ORDERED.</p> <p>Dated: _____</p> <p style="text-align: right; margin-right: 100px;">_____ Judge of the Superior Court</p> <p>Distribution:</p> <p><input type="checkbox"/> Original – Court File <input type="checkbox"/> Copy to State Department of Social Services <input type="checkbox"/> Copy to Petitioner</p>	