Public Agency Adoption Checklist – Incoming
To Florida from another state (REG 1)

☐ Sending State Transmittal form (1 copy)

☐ 100A – 1 copy for each child
  Section I
    ☐ Completed showing sending state is responsible for planning for child and is financially responsible for child
  Section II
    ☐ Type of care (adoption) – Subsidy/IV-E-assistance or non IV-E
    ☐ Finalizing in sending or receiving state
  Legal Status (Florida will complete the adoption home study if the TPR petition has been provided)
    ☐ If the goal is adoption (this should be reflected in the most recent court order) and the packet does not contain the TPR Order, the packet must contain a copy of the petition for TPR.

Section III (Services Requested)
  ☐ One item checked in each of the three columns (type of care & initial report should be the same)
  ☐ Name and address of supervising agency, if known

☐ 100B – 1 copy for each child
  Section I
    ☐ Complete demographics for child
  Section II
    ☐ Initial placement information ONLY
  Section IV
    ☐ Signature/date of person/agency supplying information ONLY

☐ Cover Letter (1 copy)
  ☐ Identifies the resource and relationship to child
  ☐ Reflects what is needed from Florida
  ☐ Gives any special requirements the placement resource must meet
  ☐ Description of any special medical/behavioral/psychological needs of the child, as well as service needs
  ☐ Gives sending state’s local contact name/address/phone number

Packet Requirements (1 copy)
  ☐ TPR Order signed by Judge on all parents or the petition for TPR (see Legal Status above)
  ☐ Social Summary on child (signed/dated within 6 months)
  ☐ Current court order (dated within 12 months) shows adoption as goal and signed by the judge
  ☐ Financial/Medical Plan form (can be a form or written in cover letter/transmittal)
  ☐ Proof of IV-E Eligibility
  ☐ Case plan (must be signed/dated)
  ☐ Birth certificate
  ☐ Copy of most recent home study of placement resource and any updates available
  ☐ Copy of progress reports on the family unit for the last 6 months (or all progress reports if the child has not yet been in their care for 6 months)

Additional Information that may be provided (1 copy):
  ☐ Medical records (may include birth records)
  ☐ Social security card
  ☐ School reports
  ☐ Psychological evaluation on child
  ☐ Florida Adoptive Home App (current version of CF-FSP 5071, available in DCF Forms)