

See Instructions (ADO600) for help in filling out this form.

State of Minnesota

District Court

County of: _____

Court File Number: _____

Judicial District: _____

Case Type: Adoption

In the Matter of the Petition of:

Petition to Access Adoption Case Records (ADO601)

Minn. Stat. § 259.61 and Rule 7.02 of the Rules of Adoption Procedure

Petitioner's Information

1. My name is _____, and I am related to the adopted person as follows:

I am the adopted person

I am a sibling of the adopted person

I am a biological parent of the adopted person

I am an adoptive parent of the adopted person

Other: _____

Procedural History

2. a. The name and date of birth of the adopted person whose adoption records are being requested:

Name: _____

Date of Birth: _____

I am unsure of the name and/or date of birth of the adopted person

b. The names of the adoptive parents: _____

I am unsure of the name of the adoptive parents

c. The names of the biological parents: _____

I am unsure of the names of the biological parents

3. The adoption took place in _____ County, Minnesota.
 I am unsure of the county in which the adoption took place.
4. The adoption occurred on the following date: _____.
 I am unsure of the date of the adoption.

Information Being Requested

5. I am requesting access to the following information (check all that apply):
- Adoption Petition
 - Adoption Order
 - Identity of adopted person’s tribal affiliation (adopted person is at least 18 years of age)
 - Other: _____
6. The names and addresses of all persons who may be affected by this request: _____

7. The benefit of allowing me the information that I am asking for outweighs the importance of keeping the information confidential because: _____

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Date: _____ Signature: _____

County and state where signed: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____