

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF THE ADOPTION OF

**Order for Hearing and Screening
(Stepparent Adoption)**

Name

Case No. _____

Date of Birth

A Petition for adoption of this person has been filed by [Name] _____.

THE COURT ORDERS:

1. Agency name: _____
Agency address: _____
Agency phone: _____
shall conduct a single-interview screening and file a report with the court by [Date] _____.
2. The hearing shall be held on [Date] _____, at [Time] _____,
at [Location] _____.
3. Petitioner shall give notice of the hearing by mailing a copy of this order to interested persons.

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ prior to the scheduled court date. Please note that the court does not provide transportation.

Name of Attorney	
Address	
Telephone Number	Bar Number

DISTRIBUTION:

1. Court
2. Child's Guardian ad Litem
3. Stepparent
4. Birth Parents
5. Parents' Attorney(s)
6. Adoption Agency
7. Tribe
8. Indian Custodian