# Form A1 Originating Application – Adoption Order
Form A1

<table>
<tr><td><strong>To be inserted by Court</strong><br><br>Case Number:<br><br>Date Filed:<br><br>FDN:<br><br></td></tr>
<tr><td><strong>Hearing Date and Time:</strong><br><br><strong>Hearing Location:</strong><br>75 Wright Street Adelaide</td></tr>
</table>

## ORIGINATING APPLICATION FOR AN ADOPTION ORDER

YOUTH COURT OF SOUTH AUSTRALIA
ADOPTION JURISDICTION


IN THE MATTER OF [*name of child*]

**Please specify the Full Name for each party. Each party should include a party number if more than one party of the same type.**


Applicant 1/First Adoptive Parent


Applicant 2/Second Adoptive Parent


Respondent 1/Birth Mother


Respondent 2/Birth Father


**Only displayed if applicable**
Chief Executive


**Only displayed if applicable**
First Interested Party

## Filed by the Adoptive Parent[*s*]

| | | |
|---|---|---|
| First Adoptive Parent | **Full Name** | |
| Second Adoptive Parent<br>**Only displayed if applicable** | **Full Name** | |
| Name of Law Firm and Solicitor **If any** | **Law Firm** | **Solicitor** |
| Address for Service | **Street Address (including unit or level number and name of property if required)** | |

| Address for Service (cont.) | **City/town/suburb** | **State** | **Postcode** | **Country** |
|---|---|---|---|---|
| | **Email address** | | | |

| | |
|---|---|
| Phone Details | **Type - Number** |

## Particulars of First Adoptive Parent

| | |
|---|---|
| Name | **Full Name** |
| | **Maiden Name (if applicable)** |
| | **Any other previous names (if applicable)** |
| Birth Details | **Date of Birth** |
| | **Place of Birth** |
| Gender | [　] Female<br>[　] Male<br>[　] Non-Binary<br>[　] Indeterminate/intersex/unspecified<br><br>**Mark appropriate section with an 'x'** |
| Date of present marriage/qualifying relationship | [　] Marriage<br>[　] Qualifying relationship<br><br>[*specify date of commencement*]<br><br>**Mark appropriate section with an 'x'** |
| Occupation | **Occupation** |
| Residential Address | **Street Address (including unit or level number and name of property if required)** |

| Residential Address (cont.) | **City/town/suburb** | **State** | **Postcode** | **Country** |
|---|---|---|---|---|

**Only display if applicable**

## Particulars of Second Adoptive Parent

| | |
|---|---|
| Name | **Full Name** |
| | **Maiden Name (if applicable)** |

| | |
|---|---|
| | **Any other previous names (if applicable)** |
| Birth Details | **Date of Birth** |
| | **Place of Birth** |
| Gender | [    ] Female<br>[    ] Male<br>[    ] Non-Binary<br>[    ] Indeterminate/intersex/unspecified<br><br>**Mark appropriate section with an 'x'** |
| Date of present marriage/qualifying relationship | [    ] Marriage<br>[    ] Qualifying relationship<br><br>[*specify date of commencement*]<br><br>**Mark appropriate section with an 'x'** |
| Occupation | **Occupation** |
| Residential Address | **Street Address (including unit or level number and name of property if required)** |

| | | | |
|---|---|---|---|
| **City/town/suburb** | **State** | **Postcode** | **Country** |

<br>

| **Birth Mother** | |
|---|---|
| Name | **Full Name** |
| | **Any other previous names (if applicable)** |
| Address | **Street Address (including unit or level number and name of property if required)** |

| | | | |
|---|---|---|---|
| **City/town/suburb** | **State** | **Postcode** | **Country** |

| | |
|---|---|
| | **Email address** |
| Phone Details | **Type - Number** |

<br>

| **Birth Father** | |
|---|---|
| Name | **Full Name** |
| | **Any other previous names (if applicable)** |
| Address | **Street Address (including unit or level number and name of property if required)** |

| | | | |
|---|---|---|---|
| **City/town/suburb** | **State** | **Postcode** | **Country** |

| | |
|---|---|
| | **Email address** |

| Phone Details | |
|---|---|
| | **Type - Number** |

| **Child** | |
|---|---|
| Name | **Full Name** |
| Date of Birth | **Date of Birth** |
| Gender | [    ] Female <br> [    ] Male <br> [    ] Non-Binary <br> [    ] Indeterminate/intersex/unspecified <br><br> **Mark appropriate section with an 'x'** |
| Place of Birth | **Place of birth** |
| Is the child an Aboriginal or Torres Strait Islander? | [    ] Yes <br> [    ] No <br><br> **Mark appropriate section with an 'x'** |
| Address <br> **Only applicable if child is aged 18 or over** | **Street Address (including unit or level number and name of property if required)** |

| | | | |
|---|---|---|---|
| **City/town/suburb** | **State** | **Postcode** | **Country** |

| | |
|---|---|
| | **Email address** |
| Phone Details <br> **Only applicable if child is aged 18 or over** | **Type - Number** |

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**Application Details**
**Mark appropriate sections below with an 'x'**

Matter Type:

This Application is for an adoption order.

This Application is made under section 8 of the Adoption Act 1988.

The Adoptive Parent[*s*] seek[*s*] the following orders:

[    ] 1. That pursuant to section 8(1) of the Adoption Act 1988 the Child be adopted by the Adoptive Parent[*s*].

[    ] 2. That pursuant to section 23(1) of the Adoption Act 1988 the Child be known by the following name:
       SURNAME: [*name*]
       OTHER NAMES: [*name*]

[    ] 3. [*any other orders sought in separately numbered paragraphs*]


This Application is made on the grounds set out in the accompanying affidavit sworn
by [*full name*]          on the    day of        20  .

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**To the other parties: WARNING**

The Applicant has applied for orders set out in this Application.

This Application will be considered at the hearing at the date and time set out at the top of this document.

If you wish to oppose the application, or make submissions about it:

- you **must attend the hearing** and
- **you may be required to file a Response** at a later stage**.**

If you do not attend the Court hearing, orders may be made without further warning.

**Pre-Action Steps**
Mark appropriate section below with an 'x'

Has the Court made an order recognising the validity of, or dispensing with, the consent of a party?

[     ] Yes
[     ] No

**Service**
Mark appropriate section below with an 'x'

The party filing this document is required to serve it on all other parties at least 5 clear days before the first hearing, in accordance with the Rules of Court.

[     ] It is intended to serve this application on all other parties.

[     ] It is not intended to serve this application on the following parties [*list names*]


      because [*reasons*]

**Accompanying Documents**
Mark appropriate sections below with an 'x'

Accompanying service of this Application is a:

[     ] Supporting Affidavit (mandatory)

[     ] If other additional document(s) please list below: