



nightlight®  
christian adoptions

*...because every child deserves a loving family*

Domestic • International • Snowflakes Embryo Adoption • Adoption Homestudies • Hague Accredited



Dear Prospective Adoptive Parents:

Thank you for your inquiry and your interest in the domestic adoption services of Nightlight Christian Adoptions. We provide services in the area of domestic, international and embryo adoption. We hope that the information included in this e-mail interest package is helpful and answers many of your questions.

Included in this package are our eligibility requirements, a check list for getting started, our agreement for services, the adopting parent questionnaire and our disclosures and complaint policy.

We realize that your search for the right agency will include examining many web sites, reading brochures, reading documentation regarding the terms, conditions and costs of an adoption, speaking to agency staff and speaking to references. This may be only the beginning for you – or you may be nearing a decision. Wherever you are in the process, we invite your questions by e-mail or telephone.

Our commitment is to provide caring and professional services to each client, recognizing their unique needs and backgrounds, while advocating for the children who need the love and stability of a family to realize their full potential. As each adoption is finalized, we do not view our job as completed, but recognize that our family has just grown again.

Nightlight is proud of having achieved Hague Accreditation for inter-country adoptions, in addition to being a member of ECFA (Evangelical Council on Financial Accountability), NCAF (National Christian Adoption Fellowship), NCFA (National Council for Adoption) and JCICS (Joint Council on International Children's Services).

If you are Christians, we look forward to sharing our common commitment to Christ as we take this emotional journey. If you do not share our faith, we hope that we will reflect God's love in such a way to cause you to consider His plan for your life.

Sincerely,

***Ronald L. Stoddart***

Director, Colorado Office

**Nightlight Christian Adoptions**  
4430 E. Miraloma Avenue, Suite B  
Anaheim Hills, CA 92807  
**Telephone: (714) 693-KIDS (5437)**  
Fax: (714) 693-5438  
[Nightlight.org](http://Nightlight.org)  
License #306004142

**Nightlight Christian Adoptions**  
150 E. 29<sup>th</sup> Street, Suite 255  
Loveland, CO 80538  
**Telephone: (970) 663-5501**  
Fax: (970) 663-9051  
[Nightlight.org](http://Nightlight.org)  
License #1590226

**Nightlight Christian Adoptions**  
1527 Wade Hampton Boulevard  
Greenville, SC 29609  
**Telephone: (864) 268-0570**  
Fax: (864) 370-0036  
[Nightlight.org](http://Nightlight.org)  
License #SR-0004500001-CPA

**A Helping Hand Adoption Agency**  
1510 Newtown Pike; Suite 152  
Lexington, KY 40511  
**Telephone: (859)263-9964**  
Fax: (859) 263-9957  
[WorldAdoptions.org](http://WorldAdoptions.org)  
License # 500256



## **Nightlight<sup>®</sup> Christian Adoptions** **Colorado Domestic Adoptions** *Information Packet Contents*

- Eligibility Requirements
- Getting Started Checklist
- Adoptive Parent Application
- Agreement for Domestic Adoption Services
- Disclosures and Grievance Procedure
- Additional Hague Compliant Documents:
  - Complaint Policy
  - Complaint Form

## Nightlight<sup>®</sup> Christian Adoptions

# Eligibility Requirements for Domestic Adoptions

Nightlight<sup>®</sup> Christian Adoptions is licensed by the Colorado Department of Human Services to select suitable families for children needing adoption. The selection of adoptive parents is based on their eligibility to meet state and agency requirements, their capacity for adoptive parenthood, and the availability of children whose needs they can meet.

- RESIDENCE:** Nightlight's Colorado office can perform Agency Adoptions only for families living in Colorado. Other Domestic adoption services are available to families throughout the United States. Please contact our office for specific details.
- RELIGION:** Applicants must be committed to providing their child with a constructive, wholesome and spiritual home environment.
- HEALTH:** Adoptive applicants must give evidence of good health, both physical and mental, which will be verified during the application process by medical examinations and psychological evaluations.
- AGE:** None; however, birthmothers tend to prefer families in their 30's or early 40's.
- MARRIAGE:** Adoptive applicants are encouraged to have been married long enough to provide the couple sufficient time to establish a home, financial security, and to adjust to the marriage as well as to each other. Married applicants must have a satisfying and secure marriage. Single parents are eligible to adopt if they meet the qualifications of a stable home environment, financial security and have a strong support network of family and friends. However, few birthmothers will choose single parents when married couples are available.
- EDUCATION:** Classes and reading are required of adoptive families pertaining to parenting skills and adoption issues. Our goal is to prepare you to be the best parents possible for your child.
- FINANCES:** Adopting parents must be able to provide a financially stable home, demonstrated by a solid credit history and ability to live within their means.
- PREGNANCY:** Before you begin the adoption process, you need to complete all your infertility treatments so you can truly be ready to be the best parent for your adopted child. If you become pregnant while in the adoption process, notify our office immediately. We will place your file on hold. When you are ready to consider adoption again – generally at least when your child is nearing their first birthday – call us to discuss re-activating your file.
- ADOPTION OF SUBSEQUENT CHILDREN:** In order to have adequate time for attachment and bonding, it is important to have a minimum of one year with the child/ren in the home before beginning another adoption.



nightlight®  
christian adoptions

...because every child deserves a loving family

Domestic • International • Snowflakes Embryo Adoption • Adoption Homestudies • Hague Accredited



## DOMESTIC ADOPTION PROGRAM GETTING STARTED CHECKLIST

We would love to see you at one of our free information seminars! These seminars are an excellent way to have your preliminary questions answered, get to know the Nightlight staff and meet other families beginning the adoption process. Seminars are held every 2 months. For more information or to RSVP, visit [www.nightlight.org](http://www.nightlight.org) and click on “Seminars/Events” or call the office at (970) 663-6799.

### How do we get started?

- ❑ **1. Fill out the Application Documents**
  - **Fill out the Application**
  - **Read and Sign the Agreement for Adoption Services**
  - **Read and Sign the Disclosures Form**
- ❑ **2. Mail the Application Documents along with:**
  - a. A current family photo** (Just for us, so we know who you are when we talk to you) **and**
  - b. Your Application fee** (see Agreement for explanation of fees) to:

**Nightlight Christian Adoptions**  
**150 East 29<sup>th</sup> Street**  
**Suite 255**  
**Loveland, CO 80538**

- ❑ **3. Begin the Homestudy.**

Once we receive your Application paperwork, we will send you the homestudy packet, which contains the necessary paperwork for completing the homestudy. Once we receive all of your homestudy paperwork, we will assign you an adoption caseworker.

Please read the enclosed information before you submit your application. If you have any questions please contact Ron Stoddart, Director of our Colorado Office, by phone at (970) 663-6799 or by e-mail at [Ron@nightlight.org](mailto:Ron@nightlight.org).

**Nightlight Christian Adoptions**  
4430 E. Miraloma Avenue, Suite B  
Anaheim Hills, CA 92807  
Telephone: (714) 693-KIDS (5437)  
Fax: (714) 693-5438  
[Nightlight.org](http://Nightlight.org)  
License #306004142

**Nightlight Christian Adoptions**  
150 E. 29<sup>th</sup> Street, Suite 255  
Loveland, CO 80538  
Telephone: (970) 663-5501  
Fax: (970) 663-9051  
[Nightlight.org](http://Nightlight.org)  
License #1590226

**Nightlight Christian Adoptions**  
1527 Wade Hampton Boulevard  
Greenville, SC 29609  
Telephone: (864) 268-0570  
Fax: (864) 370-0036  
[Nightlight.org](http://Nightlight.org)  
License #SR-0004500001-CPA

**A Helping Hand Adoption Agency**  
1510 Newtown Pike; Suite 152  
Lexington, KY 40511  
Telephone: (859)263-9964  
Fax: (859) 263-9957  
[WorldAdoptions.org](http://WorldAdoptions.org)  
License # 500256

**NIGHTLIGHT<sup>®</sup> CHRISTIAN ADOPTIONS**  
*Domestic, International & Snowflakes<sup>®</sup> Embryo Adoption Program*

Colorado Office  
150 East 29<sup>th</sup> Street, Suite 255  
Loveland, Colorado 80538

**ADOPTIVE PARENT APPLICATION**

Last Name of Adoptive Parent(s): \_\_\_\_\_

Commonly used First Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

**Contact Numbers** (Please indicate with \*, which # is best to reach you from 8-5 PST, & indicate where detailed messages can be left.):

Home: (\_\_\_\_) \_\_\_\_\_ Fax : (\_\_\_\_) \_\_\_\_\_

Male Applicant's Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Female Applicant's Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

E-Mail: Main: \_\_\_\_\_ Alternate: \_\_\_\_\_

**Emergency Contacts:** (Please note: We will contact persons at any time during or after adoption if we need to reach you.)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Address: \_\_\_\_\_

Date of marriage: \_\_\_\_\_ City and State of marriage: \_\_\_\_\_

*\*It is an Agency requirement that you must be married a minimum of three years before applying for adoption.*

Do you (or your spouse) have any children?  Yes  No If yes, how many? # \_\_\_\_\_

| Name | M/F | D.O.B. | Natural/Adopted | Resides (w/ us, other parent, etc.) |
|------|-----|--------|-----------------|-------------------------------------|
|------|-----|--------|-----------------|-------------------------------------|

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do any other adults live in your home?  Yes  No (i.e. parents, housekeepers, guests)

| Name | M/F | DOB | Relationship to you |
|------|-----|-----|---------------------|
|------|-----|-----|---------------------|

\_\_\_\_\_

\_\_\_\_\_

How did you hear about our adoption programs? \_\_\_\_\_

|   |
|---|
| OFFICE USE ONLY   |
| <input type="checkbox"/> Supervised <input type="checkbox"/> Exempt |
| Agmmt Sent _____  |
| Agmmt Rec'd _____   |

## ADOPTIVE FATHER'S INFORMATION

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Place of Birth: (city, state, country) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Are you a United States Citizen? YES / NO If no, where is your citizenship? \_\_\_\_\_

Ancestry: (i.e. German, Irish, English, etc.) \_\_\_\_\_

Education: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Salary Last Calendar Year (per IRS Form 1040): \_\_\_\_\_ Current Annual Salary: \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_ Active? YES / NO

Comments or Statement of Faith: \_\_\_\_\_

## PHYSICAL DESCRIPTION:

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

List all significant health history and current health status, including medications taken (attach sheet if necessary): \_\_\_\_\_

## FAMILY INFORMATION:

Parent's Names: \_\_\_\_\_ Marriage Intact? YES / NO

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Do you have any prior marriages? YES / NO If yes, how many? # \_\_\_\_\_  
(For each prior marriage, please list the name of spouse, the date of marriage and the date of divorce [month/year])

Have you ever failed to meet your child or spousal support obligation? YES / NO / NA

Has any child ever been removed from your care due to abuse or neglect? YES / NO

Have you ever been deprived of parental rights or had your rights restricted? YES / NO

Have you ever been arrested? YES / NO (**Include all arrests**, even where charges were dismissed, never filed, or the record was later expunged. Even if an attorney or judge told you that you do not have to list an incident, you must disclose the incident to our office. Please explain in detail on a separate sheet of paper and attach it to this application.)

Have you ever filed bankruptcy? YES / NO (If yes, please explain on a separate sheet of paper and attach.)

**ADOPTIVE MOTHER'S INFORMATION**

Full Legal Name: \_\_\_\_\_ Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Place of Birth: (city, state, country) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Are you a United States Citizen? YES / NO If no, where is your citizenship? \_\_\_\_\_

Ancestry: (i.e. German, Irish, English, etc.) \_\_\_\_\_

Education: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Salary Last Calendar Year (per IRS Form 1040): \_\_\_\_\_ Current Annual Salary: \_\_\_\_\_

Work Objective After Placement: \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_ Active? YES / NO

Comments or Statement of Faith: \_\_\_\_\_

**PHYSICAL DESCRIPTION:**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

List all significant health history and current health status, including medications taken (attach sheet if necessary): \_\_\_\_\_

**FAMILY INFORMATION:**

Parent's Names: \_\_\_\_\_ Marriage Intact? YES / NO

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Do you have any prior marriages? YES / NO If yes, how many? # \_\_\_\_\_  
(For each prior marriage, please list the name of spouse, the date of marriage and the date of divorce [month/year])

Have you ever failed to meet your child or spousal support obligation? YES / NO / NA

Has any child ever been removed from your care due to abuse or neglect? YES / NO

Have you ever been deprived of parental rights or had your rights restricted? YES / NO

Have you ever begun a homestudy? YES / NO

Have you ever been arrested? YES / NO (**Include all arrests**, even where charges were dismissed, never filed, or the record was later expunged. Even if an attorney or judge told you that you do not have to list an incident, you must disclose the incident to our office. Please explain in detail on a separate sheet of paper and attach it to this application.)

Have you ever filed bankruptcy? YES / NO (If yes, please explain on a separate sheet of paper and attach.)

# ALL APPLICANTS

Please refer to the "Getting Started Checklist" in your Information Packet.

**Include with this Application all items indicated on the checklist,**  
**including a recent Photograph of your family, the Adoption Services Agreement and your initial fees.**

Have you completed a prior Application for Adoption? Yes No

If yes, please list the Name of Agency: \_\_\_\_\_

Date: \_\_\_\_\_ Outcome: \_\_\_\_\_

Do you own or rent your home? \_\_\_\_\_

Market Value:\$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

Amount Owed: \$ \_\_\_\_\_

Date you first lived in your home \_\_\_\_\_

## IF YOU LIVE IN COLORADO:

Nightlight requires families living in Colorado to complete your homestudy through our office. If you already have a homestudy completed, please contact our office for consideration.

Have you lived in Colorado for the last five years? If not, please list the dates and location of each state/country where you have resided.

Male Applicant: Yes No

Female Applicant: Yes No

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## IF YOU LIVE OUTSIDE OF COLORADO:

Do you have a completed Homestudy? Yes No

If yes, date of completion: \_\_\_\_\_ If no, projected date of completion: \_\_\_\_\_

\*\*\*Name of Agency: \_\_\_\_\_

Social Worker's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Web site Address: \_\_\_\_\_

**\*\*\*INTERNATIONAL CLIENTS:** As a Hague Accredited agency, we are required to have a cooperative agreement with any agency performing a homestudy for our families. Please contact us in advance to verify that we have a cooperative agreement in place with your homestudy agency.  
If you do not have a homestudy agency, we would be happy to provide you with a list of agencies in your area. \*\*\*



# INTERNATIONAL ADOPTION/ HOMESTUDY APPLICANTS

Country of Interest: \_\_\_\_\_ Number of Children Desired: \_\_\_\_\_

Sex preferred: Male / Female / Either    Age Range: \_\_\_\_\_    Sibling Groups: Yes    No

Would you be willing to adopt a child with moderate or severe physical handicaps? Yes    No

If yes, please describe acceptable impairments: \_\_\_\_\_

Please describe any situation where a child's medical, physical or emotional background would not be acceptable for your family: \_\_\_\_\_

Any other comments regarding child(ren) desired? \_\_\_\_\_

Approximately 78% of children born to HIV infected mothers do not have the HIV virus.

Would you consider such a child if the child tested negative to HIV? Yes    No

(Internet research may be helpful if you have questions.)

Have you files an I-600A or I-800A with the CIS? Yes    No

If yes, Date Filed: \_\_\_\_\_ in City, State: \_\_\_\_\_

Please establish (if necessary) and provide a FedEx account number which will be used by our office for shipping your documents: \_\_\_\_\_

**HOMESTUDY CLIENTS ONLY:** If Nightlight is only performing your homestudy, please provide the information for your placing agency below:

Name of Agency: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

We understand that concurrent participation in more than one adoption program or pursuing infertility treatments while in the adoption process is not allowed without written acknowledgement. If you learn that we are in two concurrent programs, then we authorize you to notify the other program of our actions.

**We grant our permission for you to discuss all relevant information regarding our case with necessary parties, including but not limited to, our attorney, our homestudy or placing agency, the Department of Human Services, and any Interstate Compact Offices.**

We understand that all application and initial phase fees are non-refundable.

We hereby declare that all information provided in this application is true and correct to the best of our knowledge and belief.

\_\_\_\_\_  
Male Applicant

\_\_\_\_\_  
Female Applicant

## DOMESTIC ADOPTION/ HOMESTUDY APPLICANTS

Please indicate which racial/ethnic characteristics you would be open to in a child (indicate ½ where a bi-racial mix is acceptable):

\_\_\_\_\_ Any Race    \_\_\_\_\_ Asian    \_\_\_\_\_ Black    \_\_\_\_\_ Caucasian

\_\_\_\_\_ Hispanic    \_\_\_\_\_ Middle Eastern    \_\_\_\_\_ Native American

Would you be open to twins? Yes    No

Would you be open to a child older than a newborn? Yes    No    If yes, up to what age? \_\_\_\_\_

Attorney:    (If any) \_\_\_\_\_    Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

### **APPLICANTS WHO ARE ALREADY MATCHED WITH A BIRTHMOTHER:**

How did you become matched with your birthmother? (attorney, out of state agency, etc.)

\_\_\_\_\_

When is your birthmother due? \_\_\_\_\_

Are you doing an AGENCY ADOPTION or an INDEPENDENT ADOPTION? \_\_\_\_\_

We understand that concurrent participation in more than one adoption program or pursuing infertility treatments while in the adoption process is not allowed without written acknowledgement. If you learn that we are in two concurrent programs, then we authorize you to notify the other program of our actions.

**We grant our permission for you to discuss all relevant information regarding our case with necessary parties, including but not limited to, our attorney, our homestudy or placing agency, the Department of Social Services, and any Interstate Compact Offices.**

We understand that all application and initial phase fees are non-refundable.

We hereby declare that all information provided in this application is true and correct to the best of our knowledge and belief.

\_\_\_\_\_  
Male Applicant

\_\_\_\_\_  
Female Applicant



nightlight®  
christian adoptions

*...because every child deserves a loving family*

Domestic • International • Snowflakes Embryo Adoption • Adoption Homestudies • Hague Accredited



## AGREEMENT FOR DOMESTIC ADOPTION SERVICES

This Agreement is entered into between Nightlight® Christian Adoptions (Nightlight) and \_\_\_\_\_ (Adopting Parents) in regard to services to be provided by Nightlight to Adopting Parents. Nightlight is a licensed adoption agency that provides services in a variety of areas of the adoption process, including family assessments (homestudies), birthparent counseling, birthparent selection of adopting parents, birthparent relinquishments, adoptive placements, post-placement supervision, court reports and international adoptions (separate agreement provides terms of international adoption services).

Good communication is essential in a successful adoption. Nightlight encourages adopting parents and birthparents to ask questions to assure that they fully understand the adoption process, the services which Nightlight will provide and the fees and costs involved. Determining who will assist you in the adoption process is an important decision and adopting parents and birthparents are urged to fully investigate any adoption professional they use.

### Description of Adoption Service Packages

#### Agency Adoption Plan

**The Agency Adoption Plan, sometimes referred to as a full service agency adoption, consists of all necessary elements of a domestic adoption, except legal services.** Nightlight prepares the homestudy; conducts birthmother outreach, screening and counseling (up to four sessions included in program fee); assists the birthmother in selecting adopting parents; works with the birthfather (if cooperative); matches you with a birthmother; prepares the adoption plan; obtains the birthmother and/or birthfather relinquishments; places the child in your home; provides post-placement support and supervision; and prepares the required court reports to finalize the adoption. It also includes the payment of reasonable and necessary expenses incurred by the birthmother in connection with her pregnancy, such as minor medical expenses, living expenses, maternity clothing and other pregnancy related expenses.

#### Designated Agency Adoption

A Designated Agency Adoption applies to adoption situations where clients engage the services of Nightlight after having been matched with a birthmother OR who sign up with Nightlight under the Adoption Agency Plan and are then matched with a birthmother through another resource. The services provided by Nightlight include those described under Agency Adoption Plan, recognizing that Nightlight has not screened and participated in the birthmother selection process. Nightlight strongly encourages prospective adopting parents to work with licensed adoption agencies only. Although prospective adopting parents are encouraged to pursue a wide variety of networking opportunities, Nightlight reserves the right to not work with families who have been selected as adopting parents through the use of unlicensed, paid intermediaries or facilitators.

#### Interstate Adoption

Nightlight provides services for clients who are adopting from a state other than their state of residence. The services provided will vary depending on whether the adopting parents or birthparents reside in Colorado. In all cases, Nightlight cooperates with a licensed agency in the other involved state. Nightlight will define the scope of services involved in a particular adoption prior to commencing an interstate adoption. An interstate adoption does not include assisting the adopting parents with birthmother outreach, screening, or matching unless otherwise agreed upon.

---

## **Other Adoption Services**

In recognition of the fact that no two adoptions are ever exactly the same, Nightlight provides certain services which may be required for families adopting in ways other than through our standard programs. For example, Family Assessment / Homestudies performed by Nightlight can be used by families adopting internationally from countries other than those served by Nightlight's in-house international programs.

## **TERM OF AGREEMENT**

The basic term of this agreement shall be for a period of two years from the date hereof, or the date of the completion of the homestudy in the case of Agency Adoption Plan clients. To extend the term in the event a home study is expiring (after two years), the Adopting Parents must obtain an update to their homestudy in accordance with the then current fee schedule. Post-adoption supervision terms may vary according to individual inter-country requirements.

## **FEES AND COSTS**

The fees and costs vary depending on the services provided. *Please initial the line in front of the services (or service package) below that you are requesting Nightlight to provide.* If circumstances change and you need to switch to a different service package, we will make every attempt to apply the fees for services already provided to the new service package fee schedule.

### **Adoption Service Packages**

|   | <b><u>Fee</u></b>                                |
|---|--|
| _____ Agency Adoption Plan                      | \$18,000 and \$5000 donation to Birthmother Fund |
| _____ Designated Agency Adoption                | \$10,000   |
| _____ Interstate Adoption (To or From Colorado) | \$8,000 (Not matched by Nightlight)              |
| _____ Interstate Adoption (From Colorado)       | \$13,500 (Matched by Nightlight)                 |

### **Individual Adoption Services**

|  | <b><u>Fee</u></b> |
|--|-------------------|
| _____ Family Assessment / Homestudy (SAFE)               | 2,500             |
| _____ Domestic Post-Placement (including Report)         | 1,500             |
| _____ International Re-Adopt (including Report)          | 1,000             |
| (Nightlight Clients receive a \$500 credit for Re-Adopt) | 500               |
| _____ International Post-Adoption Report (each)          | 400               |
| _____ International Post-Adoption Report (4-6 pre-paid)  | 1,300             |
| _____ Birthmother Counseling (> 4 sessions) per session  | 100               |
| _____ Termination of Birthfather's Rights                | 750-1,000         |

**Please note: Agency fees are subject to change with 90 days notice. Fees must be paid by check; credit card payments for fees will not be accepted.**

## SCHEDULE OF PAYMENTS

|  | <u>Agency</u>                      | <u>Designated</u> | <u>Homestudy</u> |
|--|------------------------------------|-------------------|------------------|
| Application Fee  | \$ 1,000                           | \$ 1,000          | \$ 1,000         |
| Upon commencement (start) of homestudy visits            | \$ 1,500                           | 1,500             | 1,500            |
| Upon approval and ready to be matched with a birthmother | \$ 1,000 +<br>\$ 1,000 donation*   | n/a               | n/a              |
| Upon commencement (start) of birthmother counseling      |                                    | 1,500             |                  |
| Upon match / or prior to birth                           | \$4,000+<br>\$4,000 final donation | n/a<br>2,000      | n/a              |
| Upon relinquishment and placement                        | \$ 10,000**                        | 3,500**           | n/a              |
| Prior to finalization                                    | \$ 500**                           | 500**             | n/a              |

\* The \$5,000 donation to the Birthmother Fund will be used for any birthmother the agency works with regardless of whether she chooses adoption or not and regardless of which clients she may choose as adopting parents. A receipt for the tax deductible donation will be provided.

\*\*Within 30 days of being matched or prior to birth, whichever comes first, the balance of fees must be deposited in trust to be withdrawn in accordance with fee schedule.

If you are a returning client, and have previously worked with us on an Agency Adoption, you will be credited \$500 from the placement phase of the program fees. A Nightlight homestudy is current for a period of two years from its completion. A Homestudy Update occurs when there have been significant changes, such as the addition of a child to your family, or your Homestudy is about to expire.

The payment schedule for Interstate Adoptions and other adoption services will be provided upon commencement of the adoption engagement.

Families utilizing Nightlight for their international homestudy and post-placement services are advised that post-placement fees will be billed upon completion of the homestudy. Fees for expediting normal services will be quoted upon request.

### **Legal Services and Fees**

Fees for legal services are not included in any of the fees quoted by Nightlight and are the responsibility of the adopting parents. This includes legal fees incurred by Nightlight in connection with any contested adoption, whether it is necessary for the services of an attorney to be retained to represent Nightlight or the adopting parents. Such legal fees and costs will be billed by the attorney directly to the adopting parents.

In an uncontested adoption, in order to terminate the rights of an alleged natural father, Nightlight may offer to retain an attorney's services directly, in which case the line item "Termination of Birthfather's Rights" listed under Individual Adoption Services, will apply. Please **initial in the box** below to indicate your understanding of this additional expense.

Initial  
here

**Other Terms and Conditions**

All program fees are billed in phases which closely approximate the progress and work performed on your adoption. Fees deposited in trust are withdrawn as billed in accordance with schedule. Unless specified in advance, we do not bill for our services by the hour, nor do we keep track of the time spent on each client account. The fees paid by you are **non-refundable** when due and paid under the fee schedule. Specifically, no fees are contingent upon the successful completion of an adoption. Please **initial in the box** to indicate your understanding of this policy.

Initial  
here

Nightlight provides clients with monthly statements only if there has been activity on the case or if a balance is outstanding. All fees and costs are due and payable in accordance with the fee schedule or when billed. Fees and expenses not paid during the normal monthly billing cycle are subject to an interest charge of 10% per annum.

**Providing false information or failing to disclose required information is grounds for terminating your Application without refund of any fees paid.**

Nightlight makes no representations as to the outcome of an adoption. No guarantee can be given, although a candid exchange of questions and views between the parties is always encouraged.

This agreement was entered into this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ and shall be governed in accordance with the laws of the state of Colorado.

\_\_\_\_\_  
Adopting Parent

\_\_\_\_\_  
Adopting Parent

Nightlight Christian Adoptions, by \_\_\_\_\_

## **PROSPECTIVE CLIENTS – ADOPTIVE PARENTS DISCLOSURES**

Nightlight Christian Adoptions hereby discloses certain information to prospective adoptive parents/applicants as required by the Colorado Department of Human Services, Rules Regulating Child Placement Agencies (CCR 7.710 through 7.710.98) as required by CCR 7.710.53A.

1. Copy of current License for Nightlight Christian Adoptions attached.
2. Nightlight Christian Adoptions is a Christian adoption agency which works with good families of all faiths and does not discriminate against any person or family in violation of Colorado law. Nightlight's Mission Statement is as follows:

**Our mission is to share God's love by:**

- **Helping children, both domestic and international, to find loving families.**
- **Assisting birthparents in making a wise and loving plan for their child's future.**
- **Preparing families to be committed and effective parents to adoptive children.**
- **Recognizing and advocating the personhood of pre-born children.**

**We are committed to carrying out our mission in a way that will bring glory and honor to our Lord and Savior, Jesus Christ.**

3. Prospective Adoptive Parents may access certain information from the Colorado Department of Human Services as follows:
  - a. A list of all licensed adoption agencies in Colorado: The Colorado Department of Human Services may be reached at 303.866.3228 or 303.866.5958. A list of adoption agencies licensed to provide intercountry adoption services may be accessed at <http://www.cdhs.state.co.us/childcare/>
  - b. To review the official licensing file for a licensed adoption agency, contact the Colorado Department of Human Services at 303.866.5088.
  - c. To file a complaint against a licensed adoption agency in Colorado, contact the Department of Human Services at 303.866.3755.
  - d. A copy of the rules regulating Child Placement Agency, go to the following link:

<http://www.sos.state.co.us/CCR/Rule.do?deptID=9&deptName=500,2500%20Department%20of%20Human%20Services&agencyID=107&agencyName=2509%20Social%20Services%20Rules&ccrDocID=2827&ccrDocName=12%20CCR%202509-8%20RULE%20MANUAL%20VOLUME%207%20CHILD%20CARE%20FACILITY%20LICENSING&subDocID=49900&subDocName=7.710%20RULES%20AND%20REGULATIONS%20FOR%20CHILD%20PLACEMENT%20AGENCIES&version=31>

4. Nightlight Christian Adoptions has been approved to provide domestic and intercountry adoption services.

Nightlight will provide counseling services to women with unplanned pregnancies and, if they are interested in making an adoption plan, will share backgrounds of homestudy qualified families who meet the birthparent(s) criteria. Nightlight will be prepared to take relinquishments from birthparent(s) and obtain court orders terminating birthparent(s) rights and place the child with an approved family. Nightlight will provide post-placement services up to and including court finalization of the adoption.

Nightlight maintains direct intercountry adoption programs in Kazakhstan, Taiwan, Ukraine and Uganda. In addition, Nightlight provides adoption services for families seeking to adopt from Russia (through Alliance for Children), China (through Chrysalis House and WASATCH) and will provide homestudy services and refer clients to agencies for other countries.

Nightlight certifies families for cradle care incident to domestic adoptive placements.

5. In accordance with the fee schedule provided in advance to prospective adoptive parents, all fees are for services being provided. No fees paid to Nightlight are in exchange for the placement of a child for adoption. Nightlight's refund policy reflects payment for services and not for the successful outcome of an adoption.

6. A copy of the most current report filed by Nightlight with the State Department of Human Services is attached hereto.

7. Nightlight maintains a current fee schedule for all services on its web site [www.nightlight.org](http://www.nightlight.org) and a fee schedule specific to the services sought by prospective adoptive parents have been provided, including the cost for post-adoption services.;

8. The family assessment (homestudy) typically is completed within 2-3 months from the time the applicants submit their application for services to Nightlight. This time frame may vary depending on how diligent the applicants are in completing their background information and completing required education and training requirements.

For domestic adoptions, it is expected that applicants will be matched with birthparent(s) who meet their criteria within a 6-18 month period. However, applicants' criteria for a child will greatly influence the time involved in matching them, as well as the number of birthparent(s) contacting Nightlight desiring to make an adoption plan.

For intercountry adoptions, the time from completing the homestudy to receiving the referral of an appropriate child will vary from 2 months to 2 years, depending on the age and sex of the child desired, the country of preference and the flexibility of applicants on accepting various special needs.

9. All prospective adoptive parents must complete education and training in accordance with Colorado Regulation 7.710.55. Such training will consist of a minimum of 16 core hours of face to face training for all adoption applicants. An addition 4 hours of training is required for families adopting a medically fragile child or a child over 12 months of age or a child from a foreign country. An additional 4 hours of training (bringing the total to 24 hours) will be required for all intercountry adoption applicants. A description of the topics covered in the training curriculum is attached hereto.

10. The process for sharing information on children placed for adoption and their birthparent(s) will, of course vary depending on whether the placement is a domestic or intercountry adoption. For intercountry adoptions,



Nightlight will share all information provided by the foreign country to the prospective adoptive parents. In addition, in most cases, the prospective adoptive parents will receive other information on the child directly from the orphanage, adoption officials or court in the foreign country.

The process for sharing information in domestic adoptions will depend on whether the birthparent(s) wish to participate in a closed or open adoption. In a closed adoption, all medical and other non-identifying information on the birthparent(s) will be provided to the prospective adoptive parents as soon as that information is available to Nightlight. The only difference with an open adoption is that identifying information on the birthparent(s) will also be provided. All information on the child from the hospital will be provided to the adoptive parents, with identifying information on the birthparent(s) withheld.

11. When the adoptive parents do not have an open adoption and ongoing contact with the birthparent(s), a mechanism for future contact between the adopted child and the birthparent is provided by the State Registrar. The birthparent(s) provide preliminary information regarding their contact preference, but also have the ability to change that preference.

12. Unless required by law, Nightlight will only place children in traditional families with a preference, but not a requirement, for two parent families. In addition, Nightlight will not place a child in any home where the safety, security or emotional welfare of the child is in doubt. For instance, if a adoptive applicant has a record of child abuse, conviction of a felony involving violence within the past 10 years or any pattern of drug or alcohol abuse which has not been professionally treated (with a clear record of more than 5 years).

13. A copy of Nightlight Grievance/Appeal Process is attached hereto.

14. Nightlight offers post-adoption services as required by various foreign countries and will provide reports to those countries as required. The cost of such services is included on the intercountry fee schedules for each country. In addition, Nightlight provides post-adoption services such as reunion picnics, free consultations and referrals for families facing difficulties with their adopted child – whether domestic or intercountry.

15. Every prospective adoptive applicant is encouraged to thoroughly investigate the services being provided by Nightlight and to obtain the services of a qualified attorney to advise them on Colorado adoption laws.

17. All of Nightlight's adoption case records will be stored in a locked file cabinet in a locked office within the agency. At least once a year, all records will be scanned and stored on electronic media. In the event the agency closes its office, all electronically stored files will be transferred to the Colorado Department of Human Services.

16. Although Nightlight is qualified and prepared to offer all adoption services for which it is licensed, it may periodically partner with other qualified Colorado licensed adoption agencies to provide services, such as family assessments, birthparent(s) counseling and relinquishments and domestic adoptive placements.

18. All applicants for domestic adoption who reside in the State of Colorado must be certified for cradle care prior to placement of a child and continuing until the adoption is finalized. Applicants who will finalize the adoption in another state will not be required to be certified unless they intend to have custody of the child in Colorado prior to the finalization of the adoption.

19. Nightlight does not recommend concurrent adoptions and will only allow concurrent adoptions in exceptional circumstances where the concurrent adoption was not planned and the failure to allow a concurrent adoption would not be in the best interests of both children.

20. It is important that there never be any payment to a birthparent(s) that could be construed as a payment in exchange for the placement of a child for adoption. Therefore, only expenses that are clearly pregnancy related will be paid and all such expenses must be paid by the prospective adoptive parents through Nightlight.

21. Following the adoption of a child from a foreign country, regardless of whether the adoption was finalized in the foreign country, the adoptive parents must finalize or validate the adoption in a Colorado court. Nightlight will collect a fee for providing court documents and reports in connection with such finalization or validation.

The undersigned acknowledge receiving a copy of the disclosures listed herein, together with the referenced attachments.

\_\_\_\_\_  
Adopting Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Adopting Mother

\_\_\_\_\_  
Date

## **NIGHTLIGHT CHRISTIAN ADOPTIONS COLORADO GRIEVANCE PROCEDURE**

When a client or prospective client is dissatisfied with the service provide to them by Nightlight, the appropriate procedure would be for them to file a complaint as explained under Nightlight's Hague compliant Complaint Policy. However, if Nightlight makes a negative decision concerning a client, such as the decision to not approve them as adopting parents, a copy of this Grievance Procedure shall be provided to the client.

1. A request for a Grievance Review of any negative decision shall be in writing, directed to the Executive Director of the Agency. The request may be sent by U.S. mail, by e-mail or by FAX.
  - a. The request for Grievance Review shall include a complete description of the negative decision made and the clients' reasons for requesting reconsideration of the decision. The client should include copies of any documentation they believe would be appropriate to be considered.
  - b. The request for Grievance Review shall be signed by all parties involved, including both the husband and wife if a married couple.
  - c. The request shall include the physical mailing address, e-mail address or FAX number to which the Agency may respond.
2. The Executive Director shall notify the client within three (3) business days of the receipt of the request for Grievance Review and the anticipated date of the response.
3. The Executive Director shall consider all issues raised by the client and shall consult with the agency personnel involved in any action giving rise to the decision upon which the grievance is based. If the Executive Director is directly involved in the action being complained of, the function of the Executive Director in reviewing the grievance shall be fulfilled by the Chairman of the Board of Directors or any member of the Board who he or she may appoint.
4. The Executive Director shall respond in writing to the client. If in the discretion of the Executive Director, and if agreed to by the client, a hearing shall be scheduled to consider the grievance. Such hearing shall, if scheduled, be held within thirty (30) days.
5. The grievance review hearing shall be conducted by the Executive Director or an appointed grievance review agent in a non-adversarial atmosphere insofar as possible.
6. The parties to the grievance review hearing and witnesses, while testifying, shall be the only persons authorized to be present during the grievance review hearing unless agreed to by all parties to the grievance review.
7. The Executive Director (or the grievance review agent) shall make a written decision regarding resolution of the grievance within five (5) working days after completion of the hearing.
  - a. The written decision shall summarize the facts and issues involved and make specific findings regarding the issues.
  - b. The written decision shall be sent to each party to the grievance and to any regulatory body entitled thereto.
8. No grievance will reviewed which questions any action of the agency in compliance with a court order or a question regarding the validity of a statute or regulation.

|   |
|---|
| <b>POLICY &amp; PROCEDURE: PROCEDURES FOR RESPONDING TO COMPLAINTS<br/>AND IMPROVING SERVICE DELIVERY</b> |
|---|

|                          |
|--------------------------|
| <b>REGULATION #96.41</b> |
|--------------------------|

|                  |
|------------------|
| <b>APPROVED:</b> |
|------------------|

## **COMPLAINTS POLICY:**

Nightlight Christian Adoptions (NCA) provides services that are meant to be in the best interests of the children served through this agency. NCA aims to provide open, accountable and efficient service to our clients. While every effort is made, sometimes mistakes are made. We aspire to learn from any mistakes and the complaint procedure is seen as very important in this continuous program of improvement. All clients will be provided with a copy of our Complaint policy and procedure and the accompanying complaint form, as a part of their Information Notebook that is provided to each client with their service contract.

## **PROCEDURE:**

Any complaints that are filed with NCA will be reviewed, investigated and responded to within 30 days according to the following procedures. Expedited review will occur with time sensitive concerns or those related to allegations of fraud.

While NCA recognizes that some clients have more needs than others, it is the agency's goal to satisfy all clients possible. When a client files a complaint, it is assumed that it is because the client's problem was not adequately resolved at a lower organizational level. Complaints filed in good faith by a client will never result in any adverse consequences to the client. However, it is possible that the inability of the agency to resolve problems with a particular client may mean that the client would be better served with a different agency. NCA will always attempt to resolve client complaints and successfully complete the services for which the client engaged the agency.

The National Complaint Registry through the US Department of State can be contacted regarding any problems through the following toll free number: 888-407-4747  
or through this website: [http://www.travel.state.gov/family/adoption/convention/convention\\_462.html](http://www.travel.state.gov/family/adoption/convention/convention_462.html).

If you find that you are not able to submit your complain on the HCR form or if you have any questions related to filing out the HCR form, please feel free to contact the Department of State at [AdoptionUSCA@state.gov](mailto:AdoptionUSCA@state.gov). It is expected that any complaints are first filed and the agency's procedures are followed before proceeding with filing a complaint with the DOS.

The following steps will be taken for complaints:

1. Any birth parent, adoptive parent, prospective adoptive parent or adoptee may file a complaint with NCA regarding any services provided by NCA, it's staff, Board of Directors or its supervised providers related to an issue of compliance with the Hague Convention, IAA or regulations implementing the IAA, or any service provided by the agency.
2. Anyone filing a complaint is requested to complete a written 'complaint form.' (See attached form). This form requests the information needed to investigate the stated problem.
3. The Executive Director or his designee will review all complaints. The complaint will be fully investigated and a written response given to the client within 30 days of NCA receiving the complaint or grievance.

4. The complaints and their outcome will be filed and available for review in the Nightlight office in Fullerton, California.
5. On request by the Accrediting Entity – COA or a State Department designee -- NCA will provide a summary of all complaints received by any birth, adoptive or prospective parent or adoptee about any of the services or activities of NCA that raise an issue with compliance with the Hague Convention, IAA or regulations related to either.
6. If the individual who has filed the complaint is not satisfied with the response by the executive director, they may then appeal in writing to the NCA Board of Directors for review of the complaint.
7. The Board of Directors will review the complaint at the next regularly scheduled Board Meeting following the submission of all required documentation from the individual. The Board of Directors will make a decision within thirty (30) days following the submission of all necessary documentation. A majority vote by the Board of Directors will determine the decision.
8. A written copy of the final decision will be placed in the client file. The final written determination will be released to the client, but not the reasoning behind it.

All decisions are based on what is in the best interests of the child.

\_\_\_\_\_ have reviewed the Complaint Policy and Procedure for Nightlight Christian Adoptions. I/We agree to abide by the procedure listed above and ultimately the decision of NCA Board of Directors if they should be called upon to determine the outcome of a complaint.

\_\_\_\_\_  
Adoptive Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Adoptive Parent

\_\_\_\_\_  
Date

**NIGHTLIGHT CHRISTIAN ADOPTIONS COMPLAINT FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Nature of Complaint: (Please be specific, including names of involved staff members, time of incident, place of incident and issues related to the incident. Specifics help us to better investigate your concerns. Please include any supporting documents and attach additional sheets if necessary).

---

---

---

---

---

---

---

---

Suggestions on how you wish this issue to be resolved or handled in the future:

---

---

---

---

---

---

---

---

Investigated by: \_\_\_\_\_ Date: \_\_\_\_\_

Action Taken: \_\_\_\_\_

---

---

---

---