

Family Information Service

If the adoption occurred prior to 1994, the amount of information provided is determined by factors such as;

- Whether the person you are seeking has prohibited the release of the information (a Notice of Prohibition is valid for up to 3 years, and can be renewed)
- Whether you are a birth parent, an adoptee, or an adoptive parent
- The amount of detail contained in the files located (files were written according to the legislative requirements of the time)
- In accordance with the Adoption of Children Act 1994, you are required to receive counselling prior to the release of information.
- Prior to any information being released to you, you need to verify your identity. Please provide two certified photocopies of identification documents.
- This form is for all enquiries regarding adoption.
- This form is to be used to register any wishes or conditions you may have in relation to contact with other people.

Section A – To be completed by all applicants

Do you identify as Aboriginal or TSI?	Yes/No
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Applicant details

Current Given Name/s	
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Current Surname	
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Date of Birth	
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Current Address	
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Telephone	
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Email address	
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Are you

an adopted person	Yes/No	a relative of an adopted person	Yes/No
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a birth parent	Yes/No	a relative of a birth parent	Yes/No
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an adoptive parent	Yes/No	other (please specify)	
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Section B – To be completed by all applicants			
Your adoptive mothers name			
Your adoptive fathers name			
Full Name given to you by your adoptive parents			
Adoptive parents address at time of adoption: If unknown – please indicate 'unknown'.			
Have you applied previously to Territory Families Adoption Unit for identifying information?			Yes/No
Section C – To be completed by the birth parent			
Birth mothers full names at the time the child was relinquished for adoption (if recorded at time of birth)			
Birth fathers full names at the time the child was relinquished for adoption (if recorded at time of birth)			
Address at that time			
If the child was named at birth, what was his / her name			
Child's date of birth			
Child's place of birth- Town/City/Country			
Have you applied previously to the TF Adoption Unit for identifying information?			Yes/No
Signature		Date	
Section D – To be completed by all applicants			
Are you seeking information about			
a birth mother	Yes/No	a birth father	Yes/No

a relinquished son	Yes/No	a relinquished daughter	Yes/No
another person	Yes/No	other (please specify)	Yes/No
Section E – To be completed by all applicants			
What information are you seeking?			
Non-identifying information which was recorded at the time concerning the person/s, you are enquiring about			Yes/No
Information which identifies the person/s you are enquiring about			Yes/No
Documentation which will allow an adopted person to obtain their original birth certificate			Yes/No
As much as possible, the Territory Families Adoption Unit will act as first contact and mediator with all parties.			
Section F – To be completed by all applicants			
This section is provided for you to put down, in your own words, anything you think significant or that concerns you in relation to your enquiry. For example: Any other names you have been known by or any more information which may assist in the search			
Signature		Date	

Further information

Email your completed form to TFHC.Adoptions@nt.gov.au

Or mail; TF Adoption Unit

PO Box 37037

WINNELLIE NT 0820

Phone: (08) 8922 5519