AOC-290
Rev. 01-03
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Commonwealth of Kentucky
Court of Justice *www.kycourts.net*

KRS 199.570; 199.572

PETITION TO INSPECT ADOPTION RECORDS

Case_____

Court_____ Circuit _____

County_____

IN RE:_____

PETITIONER, Adult Adopted Person (Twenty-one years of age or older)

_____
Names of Adoptive Parents

NOTICE TO PETITIONER

You are requesting to inspect your adoption records retained by this court. Provided you are able to satisfy the court of your identity, this request will be granted unless (1) your biological parents have left in your adoption file a record stating that they do not wish you to be able to learn their identity; or (2) there is no record in the file of the willingness of your biological parents to permit such an inspection. By completing the form below, you may petition the circuit court to permit you to inspect and/or copy your adoption records, or in the alternative, to order the Cabinet for Families and Children to notify your natural parents of your request and to obtain their consent. The statute provides that the court has seven (7) working days to order the Cabinet for Families and Children to notify your biological parents of your request. If your biological parents are not readily located, the Cabinet for Families and Children will have six (6) months to search for and locate them. If your biological parents are located they will have 60 days to respond. For this search by the Cabinet, you may be asked to pay a reasonable fee not to exceed $250.

PETITION

Comes the Petitioner, an adult adopted person who is 21 years of age or older, and moves the court for a finding that the court is satisfied of his/her identity, and to permit inspection and/or copy of his/her adoption records retained by this court, there being a record of the biological parents' consent to such inspection contained with the adoption records; or order the Cabinet for Families and Children to notify his/her biological parents of the petitioner's desire to inspect and/or copy his/her adoption records.

_____
Date

_____
Signature of Petitioner

_____
Address

_____
City/State/Zip Code

_____
Birthdate

Distribution: Court File

_____
Telephone Number