



UPDATED SOCIAL HISTORY INFORMATION

This information is intended to update my file for purposes of disclosure.

This updated history is information with respect to: _____
(Your Name)

I am completing this information as (check one):

- an adoptee
- an adoptive parent
- a birth father
- a birth mother
- a birth sibling
- a birth relative – relationship to adoptee: _____

CURRENT MAILING ADDRESS AND CONTACT INFORMATION

Address: _____

Phone: _____ Email: _____

CURRENT FAMILY SITUATION (ie. married, divorced, children, grandchildren - how many, their ages, sex etc.)

PHYSICAL DESCRIPTION (ie. height, weight, colour of hair and eyes, outstanding features etc.)

HEALTH (ie. any serious illness and/or diseases, include immediate family members etc.)

EDUCATION AND EMPLOYMENT (ie. grade completed, special training etc.)

INTERESTS AND LIFESTYLE (ie. Hobbies, likes and dislikes etc.)

PERSONALITY/TEMPERAMENT (ie. Outgoing, quiet, energetic, friendly etc.)

FAMILY SUPPORT (ie. are they supportive of you seeking disclosure information and/or are they aware, how do they feel)

THOUGHTS ABOUT A POSSIBLE REUNION (ie. expectations, hopes, fears and possible concerns etc.)

ADDITIONAL INFORMATION/SPECIAL MESSAGE (ie. any other information you would like to share)

REGISTRATION INFORMATION

Have you registered with the Adoption Disclosure Register (through Service Ontario)?

YES NO

If yes, when _____

I hereby permit the Family & Children's Services of St. Thomas & Elgin to share the above information (in non-identifying format) with my birth relative if/when they contact the Society for Adoption Disclosure services. I will keep the Society advised of any address and contact changes for myself. I understand that I can choose to provide or decline this consent and that, even though I am now consenting, I am able to withdraw this consent in the future, by providing notification in writing to the Central Intake Department at the Family & Children's Services of St. Thomas & Elgin. I further understand that any withdrawal of my consent will not affect anything done in accordance with this consent prior to such withdrawal.

Disclaimer: This Social History Update information was provided to Family and Children's Services of St. Thomas & Elgin post adoption: The Society has not verified and cannot guarantee the accuracy of the information provided by the third party.

Signature

Date

Please return this completed form, along with a photo copy of your proof of identification to:

Hard copies of the form can be **mailed**, or **delivered**, to
Family and Children's Services of St. Thomas and Elgin
Attn: Adoption Disclosure
99 Edward Street, St. Thomas, ON N5P 1Y8

Fax: 519-631-0596

Email: info@caselgin.on.ca