



## HOME STUDY AGREEMENT FOR INTERNATIONAL ADOPTION

This Agreement is made between the prospective adoptive parent(s) and The Datz Foundation.  
You may print this page, and fill out your agreement

1. The Datz Foundation agrees to conduct a home study investigation of the prospective adoptive parent(s). If the Foundation deems the prospective adoptive parent(s) to be unsuitable for adoption, the Foundation will inform them and provide no additional services under this Agreement. The prospective adoptive parent(s) will be charged only a pro-rata fee for the Foundation's services. The determination regarding the suitability is within the sole discretion of the Foundation. The prospective adoptive parent(s) agree(s) to hold harmless the Foundation in the event that they are not approved for the adoption of a child.
2. Standard Home Study Reports for International Adoptions: The prospective adoptive parent(s), who reside in MD, DC, and VA agree(s) to pay the amount of \$1,900 in advance of the home study. The fee for an expedited home study is \$2,500. In the event that the prospective adoptive parent(s) decide(s) to discontinue the home study, a refund may be issued, depending upon how many services have been rendered when the study is discontinued. The prospective adoptive parent(s) will pay for all expenses, such as travel, parking, etc. which may be incurred by the Foundation in the course of conducting the home study. The mileage from the home of the social worker to the adoptive home is billed at \$.59 per mile. If the one-way trip from the home of the social worker to the adoptive home takes more than 45 minutes, travel time is billed at \$20 per hour. The clients agree to reimburse the social worker directly. The closest social worker will be assigned to reduce costs. Some visits can occur at The Datz Foundation office or in the social worker's office.
3. United States citizens adopting from abroad must designate a Primary Provider (\*), which is an accredited adoption agency. Indicate below the following information:

\_\_\_\_\_

Country from which you plan to adopt.

\_\_\_\_\_

Name of Primary Provider

(\*): The completed home study report cannot be issued until a primary provider is designated and retained.. A primary provider is a US based adoption agency accredited by the US Department of State to monitor the adoption including assisting in identifying the child, overseeing the consents to terminate parental rights, performing the home study, determining best interest of child and monitoring the case until completion.

4. This Agreement pertains to a home study investigation and in no way obligates the Foundation to provide any other services such as an adoptive placement. This Agreement does not obligate the Foundation to provide post-placement visits (If you require us to guarantee in advance that we will conduct post-placement supervision of a placement, we will require the fee to be placed in escrow. The fee is \$350 per visit.)
5. Home Studies are valid as follows. Virginia: 36 months after finalization (unless the home study has been used for an adoption); Maryland and DC: 12 months after finalization (once a home study has been used complete an adoption, it must be updated).
6. The police and child abuse clearances of some jurisdictions expire after three months and must be updated.
7. Clients will receive a draft of completed home study and may make corrections/revisions.
8. Two notarized copies of the home study will be provided.
9. Maryland residents: List your county of residence \_\_\_\_\_
10. Additional Charges:
  - \$10 per page: Revisions of the home study after clients have approved draft and home study has been finalized
  - \$20: Any document issued by the Foundation requiring notarization
  - \$2: Each additional photocopy (not notarized)



## HOME STUDY AGREEMENT FOR DOMESTIC (U.S.) ADOPTION

This Agreement is made between the prospective adoptive parent(s) and The Datz Foundation.

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### SIGNATURES

We, the undersigned, agree with the terms of this Agreement, and remit payment.

\_\_\_\_\_  
Vivian Datoff, Director

\_\_\_\_\_  
Parent # 1 (print name)

\_\_\_\_\_  
Parent # 1 (signature)

\_\_\_\_\_  
Parent # 2 (print name)

\_\_\_\_\_  
Parent # 2 (signature)

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

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

E-Mail Addresses: \_\_\_\_\_