

INSTRUCTIONS FOR REQUEST TO INSPECT ADOPTION RECORDS (FORM 1)

*****GENERAL INFORMATION*****

A. The new law was effective as of **January 1, 1991** and only applies to adoptions granted by a judge in the State of Hawaii.

B. SUMMARY OF THE LAW:

Adult adoptees and their natural parents and adoptive parents may submit to the Family Court a request to inspect the Court's adoption records. Upon receipt of this request (Form 1), the Court will send a notice to the natural parents OR to the adoptee (depending on the identity of the applicant). The person receiving notice may then submit an affidavit requesting that identifying information relating to him or her remain confidential. This affidavit must be received by the Court within sixty (60) days of the date the person received the notice. If the notice is undeliverable, the applicant will have the option of pursuing a search by an independent search agent who has one hundred and eighty (180) days to conduct a search for this person. The applicant is responsible for all costs of the search (approximately \$300 per subject but negotiable between applicant and searcher). If the search is unsuccessful, or if contact is made but the person does not submit an affidavit, the applicant will be permitted to inspect the records.

The Family Court does not endorse any search agent. However, all search agents meet the following minimum qualifications required by the Family Court: (1) no conviction for a felony or crime of moral turpitude; (2) background with investigative experience; (3) resident of Hawaii; (4) completed a personal interview with Family Court; and (5) signed an Oath of Confidentiality agreeing not to disclose any information from the adoption record without prior Court approval. The duties of the search agents are specified by law. Thus, the search agent's sole responsibility is to find the natural parent(s) or adoptee, give him/her notice of your request and obtain their response(s) to your request. The search agents cannot provide any services during the 180 day search period other than those specified by law.

C. The law requires that a copy of this Form 1 be included in the notice sent to the other parties.

D. You may submit this request in person (bring a picture ID) or by mail.

1. SPECIFY THE CORRECT CIRCUIT: Send this request to the Family Court in the circuit in which the adoption took place.

2. ADDRESSES:

a. 1st Circuit -- Island of Oahu

By mail:
Adoption Records
Family Court, First Circuit
P.O. Box 3498
Honolulu, Hawaii 96811-3498

In person:
Judicial Services Office
Kaahumanu Hale, 2nd Floor
777 Punchbowl Street
Honolulu, Hawaii 96813

b. 2nd Circuit -- Islands of Maui, Molokai and Lanai:

Adoption Records
Family Court, Second Circuit
2145 Main Street, Suite 206
Wailuku, Maui, Hawaii 96793-1679

c. 3rd Circuit -- Island of Hawai'i:

Adoption Records
Family Court, Third Circuit
345 Kekuanaoa Street, Room 40
Hilo, Hawaii 96720-4388

d. 5th Circuit -- Island of Kauai:

Adoption Records
Family Court, Fifth Circuit
3970 Kaana Street, Suite 305
Lihue, Kauai, Hawaii 96766-1283

*****INSTRUCTIONS TO COMPLETE FORM 1 *****

1. **NAME OF APPLICANT:** State your full legal name (first, middle and last names). Check box indicating your gender.
2. **RELATIONSHIP TO ADOPTEE:** The adoptee is the child who was adopted. Place an “X” in the box which indicates whether you are the adoptee, natural parent (birth parent of adoptee), or the adoptive parent (parent who adopted the child).
3. **NAME OF ADOPTEE:**
For natural parents:
State the full legal name of the adoptee, if known. If the full legal name of the adoptee is not known, please provide the following information:
 - A. The adoptee’s full name at time of birth and prior to adoption; or
 - B. If the adoptee was not named at the time of birth, state: 1) the sex of the child; and 2) mother’s last name at the time child was born. Example: “Female Smith.”
4. **DATE AND PLACE OF BIRTH:** State Adoptee’s birthdate and the city, state and/or country of birth.
5. **ADOPTIVE FATHER:** State the full name (first, middle and last names) of the father who adopted the child, if known.
6. **ADOPTIVE MOTHER:** State the full name (first, middle and last names) of the mother who adopted the child, if known.
7. **BIOLOGICAL FATHER:** State the full name (first, middle and last names) of the biological father of the child, if known.
8. **BIOLOGICAL MOTHER:** State the full name (first, middle and last names) of the woman who gave birth to the child, if known.
9. **REQUEST IS FOR:** Place an “X” in the appropriate box which describes what action you are requesting.
10. **REASONS FOR REQUEST:** State why you want the action requested.
11. **APPLICANT’S ADDRESS:** Print or type your street or mailing address, city and state (country) and zip code. The Court will make every effort to be discreet. Please indicate the address at which you wish to be contacted.
12. **APPLICANT’S TELEPHONE NUMBERS:** State the telephone number at which you may be reached (optional).
13. **PERJURY LANGUAGE:** If you are submitting the request, in person, sign and date the Request. If you are mailing the request, see Line 15.
14. **DATE AND SIGNATURE LINE:** If you are mailing the request, see Line 15 before signing.
15. **NOTARIZATION:** If you are mailing the request, you must sign and date this document in the presence of a Notary Public. There will be a charge for this service. You may find a Notary Public in a bank or through the yellow pages of your telephone directory.
16. A copy of your completed request will be included in the notice sent to the adoptee or natural parent.