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January 28, 2010

Dear Family,

We appreciate your interest in bringing a Haitian orphan into your family. However, as we've seen, the existing government has been virtually destroyed and it is impossible to predict how this will affect the timing and processing of international adoptions. We understand that Americans, moved by images of children in need, want to open their homes and adopt Haitian children who had not been identified for adoption before the earthquake. However, the U. S. State Department advises against this course of action at this time.

A **Haitian Adoption Waiting List** has been created in view of this, for families specifically interested in Haiti. By completing the enclosed form, you are assured a priority reservation to apply for the Haiti program when it reopens. A place on the Waiting List also ensures you will receive regular updates on the status of Haiti via e-mail, agency updates and newsletters. As a Waiting List family you will also be ready to more quickly activate your status with the agency once adoptions have resumed.

Carolina Adoption Services is a children's charity dedicated to improving the quality of life for orphans and vulnerable children in Asia, Eastern Europe, Latin America and Africa. There are approximately 210 million orphans in the world today; many of whom are available for international adoption in countries currently processing adoptions. Should you find that you do not qualify for a Haiti adoption or would like to immediately begin an international adoption from another country, please visit our website and submit an application.

Please know that right now our main priority, along with that of the Joint Council on International Services and other humanitarian aid organizations, is ensuring the health and safety of the children and caregivers and coordinating with officials to bring those children already in the adoption process home to their adoptive families. Substantial monetary aid is needed to allow the orphanage staff to buy the essential items necessary for survival.

Our orphanage, like most others, was completely destroyed. They do not have adequate toilets or kitchen facilities, the children are being bathed in buckets with well water. They are presently living out in the open with only a few tarps serving as cover. They are relying on organizations such as Carolina Adoption Services to provide funding for their immediate needs as well as rebuilding. **Please consider making a donation to our Haiti relief fund via our website. (www.carolinaadoption.org/donate).**

The **Waiting List Reservation form** is included. Please complete, sign and return by mail.

Thank you again for your interest and concern.

Sincerely,

Carolina Adoption Services

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RESERVATION FOR HAITIAN ADOPTION WAITING LIST

PLEASE INITIAL EACH ITEM BELOW:

_____ I/We wish to assure a reservation to apply for the Haiti adoption program when it reopens and submit a **non-refundable** \$300 to reserve our slot, understanding that the agency can assist a limited number of families at one time.

_____ I/We understand that adoptions in Haiti are currently suspended and it's uncertain when adoption processing will be resumed.

_____ I/We understand that by submitting this Reservation form we will be placed on the Haiti Waiting List. Further contact from CAS will be limited to the provision of monthly updates via email, electronic newsletters, and any "Breaking News" announcements as they come available.

_____ I/We understand that the \$300 reservation fee is non-refundable but may be applied against the current application fee in place when the Haiti program reopens.

_____ I/We are aware of all of the Haiti Government's current adoption criteria for prospective adoptive parents and are aware that we must meet the country's requirements, as well as those of our State and US Immigration, in order to proceed **when** adoptions from Haiti reopen, including by not limited to the following:

- Married couples must be married at least 10 years
- Age, 35 yrs & up
- No other children in the home
- No significant physical or mental health history
- No significant criminal history
- Demonstrate adequate financial resources

_____ I/We understand that CAS has the right to close this program in the event of 12 months of inactivity.

PLEASE PRINT

Male Applicant: _____ Female Applicant: _____

Address: _____

Home phone: _____ Preferred email address: _____

DOB: Male Applicant _____ Female Applicant: _____ If married, date of marriage: _____

I/We agree(s) to the terms of this agreement:

Signature of Female Applicant

Date

Signature of Male Applicant

Date

**PLEASE SIGN AND
RETURN BY MAIL
ALONG WITH PAYMENT**