Application for a direction under section 88(1) of the Adoption and Children Act 2002

Name of court	
Case no.	
Date received by the court	
Date issued	

Notes to applicants

- Before filling in this form, please read the guidance notes on completing the form.
- Please complete every Part. If you are not sure of the answer to any question, or you do not think that it applies to you, please say so.
- If there is not enough room on the form for your reply, you may continue on a separate sheet. Put the child's full name, the number of the Part and the paragraph reference at the top of the continuation sheet.
- Please use black ink when filling in the form.

Part 1 About you	See Note 1			
First applicant	Second applicant			
a) Title	a) Title			
☐ Mr ☐ Mrs ☐ Miss	☐ Mr ☐ Mrs ☐ Miss			
☐ Ms ☐ Other	☐ Ms ☐ Other			
b) My name is	b) My name is			
First name(s) in full	First name(s) in full			
Last name	Last name			
c) My address is	c) My address is See Note 2			
d) My telephone number is	d) My telephone number is			
e) My relationship to the child is	e) My relationship to the child is See Note 3			

f) My/our solicitor in these proce	edings is			
Name of solicitor				
Name of firm				
Address (including postcode)				
Telephone no.	F	ax no.		
DX no.				
Fee account no.				1
E-mail address				
Part 2 About the child a) The name of the child is First name(s) in full	Last n	ame		See Note 4
_ , _	Girl	nild was born on		
Part 3 About the responsa) The Child's Adopters	ndents			See Note 5
The name of the child's adop	tive parent(s) is/are:			
First adoptive parent	Second	adoptive parent		
Title	Title	Mr. Mro	□ Mioo	
<pre></pre>	☐ Miss ☐ M		Miss	
First name(s) in full	First n	name(s) in full		
Last name	Last n	ame		
Address	Addre	ess		1
1				1

First pare	nt	;	Second paren	t		
M	r Mrs	Miss	Mr	Mrs	Miss	
M	s Other		Ms	Other		
First na	me(s) in full		First name(s	s) in full		
Last na	me		Last name			
Addres	S		Address			
	option agency mplete where the child	was placed for ad	option by an add	option agency)		See Note 6
Name	of adoption agency					
Addres (includi	ng post code)					
Name the ag	of your contact in ency					
Teleph	one no.					
	al authority to whom or parental responsib					
Name	of local authority					
Addres (includi	ng post code)					
Name the au	of your contact in thority					
Teleph	one no.					

e) The Attorney General

b) The Child's parents
The name of the child's parent(s) is/are:

		See No
a	oply for a direction that, in respect of the child (insert name of child)	See No
1	a) section 67(3) of the Adoption and Children Act 2002 shall not apply	
•		
	b) section 67(3) of the Adoption and Children Act 2002 shall apply with the following	
	modifications:	
	(c) The reasons for this application are	See No

Part 5 Declarations

I/we certify that a Convention adoption which was authorised on	See Note 9
at	
by which	L
and	
adopted (insert the name of the child)	See Note 4
was not, under the law of the country in which the adoption was effected, a full adoption	See Note 10
and that the consents referred to in Articles 4(c) and (d) of the Convention have not been given for a full adoption	See Note 11
orthat the United Kingdom is not the receiving State within the meaning of Article 2 of the Convention	See Note 11
and that it would be more favourable for (insert name of child)	See Note 4

if a direction under section 88(1) of the Adoption and Children Act 2002 was given.

A copy of the Convention adoption is attached

Part 6 Statement of truth

Proceedings for contempt of court may be brought against a person who makes or causes to be made, a false statement in a document verified by a statement of truth.

*[I believe] [The first applicant believes] that the facts s *I am duly authorised by the first applicant to sign this		• •		
Print full name				
Signed	Date 「			
*[First applicant] [First applicant's solicitor] [First	t applicant	t's litigation friend]		
*delete as appropriate				
Proceedings for contempt of court may be brought against a person who makes or causes to be made, a false statement in a document verified by a statement of truth.				
*[I believe] [The second applicant believes] that the facts stated in this application are true. *I am duly authorised by the second applicant to sign this statement.				
Print full name				
Signed	Date			

*[Second applicant's litigation friend] *[Second applicant's litigation friend]

^{*}delete as appropriate

If you attend the court for a hearing

1. Do you/either of you have a disability for which you require special assistance or special facilities?	See Note 12
☐ Yes ☐ No	
If Yes, please say what your needs are below (the court staff will get in touch with you about your requirements)	
2. Do you doith or of you want to use the complete of an interpretar?	
2. Do you/either of you want to use the services of an interpreter?	
☐ Yes ☐ No	
If Yes, please specify which language (court staff will get in touch with you about your requirements)	

What to do now

Once you have completed and signed this form, you should take or send the form and **three copies** to the High Court, together with the court fee and a copy of the Convention adoption. If you are not sure about the court fee payable for your application, or you think that you may be exempt from paying all or part of the fee, you should contact the court for information.