



Administered by:
Lockton Risk Services
(800) 250-7876

**ADOPTION
SUPPLEMENTAL APPLICATION**

APPLICANT'S INSTRUCTIONS:

This form is to be completed if the Applicant showed any activity in the Adoption area of practice shown in Category E. of Section II. "Firm's Practice," on the main application. If space is insufficient to answer any question fully, attach a separate sheet. Answer all questions completely.

APPLICANT FIRM:

1. During the past three (3) years, what is the total number of adoptions that you have had any type of involvement with?
2. During the past three (3) years, for approximately how many adoptions in each of the following categories have you provided any kind of advice or services? *(Please enter a number in each category. If there has been no activity in a particular category, please enter None.)*

	Open adoptions
	Closed adoptions
	Interstate (At least one party to the adoption resides in a state different than the other parties)
	International: Name primary countries:
	Adoptee had been physically, sexually or emotionally abused prior to being adopted
	Adoptee had any significant or serious medical conditions or diseases
	Adoptee was exposed to HIV or AIDS prior to adoption
	Any party to the adoption had a history or background of alcohol or drug abuse
	Single parent adoptions

3. a. Have you ever represented or provided any kind of advice or services, to two (2) or more parties to the same adoption (i.e., birth parents and adoptive parents, or adoptive parents and adoptee, or foster home and adoptive parents, etc.) Yes No

b. If Yes, how many times this has been done in the past three (3) years:

c. If Yes, describe, in general, what precautions you take to mitigate the possibility of an alleged conflict of interest in these situations (i.e., use of waiver forms, consent forms, etc.)

4. During the past three (3) years, on approximately how many occasions have you been involved in attempting or helping to locate adoptive parents for a baby or child that is up for adoption?

5. When the need arises to disclose certain factors or conditions concerning the adoptee to the adoptive parent(s), describe, in general, how the client file is documented confirming that the client has received and acknowledged the disclosures you have given:

6. a. During the past three (3) years, have you been involved in any situations where you have indicated or admitted to anyone that you failed to disclose any pertinent or significant information concerning an adoptee to the adoptive parents prior to the adoption? Yes No

b. If Yes, please describe in detail:

Please provide any additional information as to the standard practices and procedures you use to mitigate against the chance of incurring a malpractice claim arising from your adoption activities.

I understand the information submitted herein becomes a part of my Professional Liability Insurance Application and is subject to the same warranty and conditions.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Signature of Owner, Officer or Partner Print or Type Name and Title Date (month-day-year)