

NADE - Non-DFS Adoption Data Entry

This screen is used to display, add or modify information related to private or non-agency adoptions. Central Office staff will enter information gathered from other adoption agencies on this screen.

```
CAFSNADE          NON-DFS ADOPTION DATA ENTRY          07/06/2016  11:19
USER ID : C71315  MODIFY
CAPS ID : 00001260  25      NAME: COCONUT, CARLA          SSN: 741-25-6389

ADDRESS:  345 COFFEE CT
          HELENA                      MT      59601
-----CHILD ADOPTION ASSISTANCE / PARENT INFORMATION-----
CAPS ID:  00001258      COCONUT, CARL                      RLT:  AFR
CAPS ID:                                     RLT:
ADDRESS:  345 COFFEE CT
          HELENA                      MT      59601      PHONE:  406  444-9876
-----CHILD ADOPTION ASSISTANCE /MEDICAID INFORMATION-----
ADOPT FINAL DATE:  01/01/2012  SEX : F  ETHN : CA  HISP ORG: N  DOB:  06/05/1997
MEDICAID #:  4321123          TITLE IV-E ELIGIBLE:  Y      OTHER INSURANCE:  N
AA STATE:  CA  COUNTY:  ALM  DATE PROCESSED:  01/01/2012  DATE OPEN:  01/31/2012
DATE MEDICAID CLOSED:  02/29/2012  MEDICAID CLOSURE REASON:  FMS
-----SIBLING INFORMATION-----
CAPS ID:  00001261  COCONUT, CATHY      CAPS ID:  00001262  COCONUT, CADEN
CAPS ID:  00001263  COCONUT, CAITLYN    CAPS ID:  00001264  COCONUT, CARTER
CAPS ID:  00001265  COCONUT, CARRIE     CAPS ID:  00001266  COCONUT, CHRISTOPH
CAPS ID:  00001267  COCONUT, CLARISSA   CAPS ID:  00001268  COCONUT, CANDY
SHIFT+F2=NOTES          SHIFT+F9=RELL

                                     PATH:  _
```

Field Descriptions (F12) indicates code lookup is available.

CAPS ID (F12)

Enter the CAPS ID of the person you wish to add or view adoption details for.

NAME

This field will display the name of the person whose ID is entered in the CAPS ID field.

CHILD INFORMATION

DATE PLACED

Enter the date the child was placed in the adoption placement.

SEX (F12)

This field will display the sex code that was entered for the child on the PERD (Person Detail) screen. This cannot be entered on this screen.

ETHN (F12)

This field will display the ethnicity code(s) that were entered for the child on the PERD (Person Detail) screen. This cannot be entered on this screen. *Up to six (6) codes could be displayed.*

HSPNC ORG

This field will display the Hispanic origin flag that was entered for the child on the PERD (Person Detail) screen. This cannot be entered on this screen.

DOB

This field will display the date of birth that was entered for the child on the PERD (Person Detail) screen. This cannot be entered on this screen.

BIRTH STATE (F12)

This field will display the state where the child was born that was entered on the PERD (Person Detail) screen. *If no state code is displayed, this can be manually entered.*

BIRTH CNTRY

Enter the country where the child was born.

SPECIAL NEEDS (Y/N)

Enter "Y" (yes) if the child has special needs or "N" (no) if the child does not have special needs.

PETITION INFORMATION

PETITION NUMBER

Enter the petition number for the adoption petition.

DATE

Enter the date the adoption petition was filed.

COUNTY (F12)

Enter the county where the adoption petition was filed, if filed in the state of Montana.

STATE (F12)

Enter the state where the adoption petition was filed.

PETITIONER NAME

Enter the name(s) of the petitioner(s) for the adoption petition.

PET. MOTHER – BIRTHYEAR

Enter the birth year for the petitioning (adoptive) mother.

PET. MOTHER – ETHNICITY

Enter the ethnicity code(s) for the petitioning (adoptive) mother. *Up to six (6) codes can be entered.*

PET. MOTHER – HSPNC ORG

Enter the appropriate Hispanic origin flag for the petitioning (adoptive) mother. Enter “Y” (yes) if there is Hispanic origin, “N” (no) if there is no Hispanic origin, “U” (unable to determine) if there is not a way to identify Hispanic origin or “D” (declined) if the adoptive mother declined to provide this information.

PET. MOTHER – MAR. ST.

Enter the marital status for the petitioning (adoptive) mother.

PET. MOTHER – REL

Enter the relationship of the petitioning (adoptive) mother to the child, prior to the adoption.

PET. FATHER – BIRTHYEAR

Enter the birth year for the petitioning (adoptive) father.

PET. FATHER – ETHNICITY

Enter the ethnicity code(s) for the petitioning (adoptive) father. *Up to six (6) codes can be entered.*

PET. FATHER – HSPNC ORG

Enter the appropriate Hispanic origin flag for the petitioning (adoptive) father. Enter “Y” (yes) if there is Hispanic origin, “N” (no) if there is no Hispanic origin, “U” (unable to determine) if there is not a way to identify Hispanic origin or “D” (declined) if the adoptive father declined to provide this information.

PET. FATHER – MAR. ST.

Enter the marital status for the petitioning (adoptive) father.

PET. FATHER – REL

Enter the relationship of the petitioning (adoptive) father to the child, prior to the adoption.

INVESTIGATOR

Enter the name of the worker who is coordinating the collection of information related to this adoption (home studies, licensing, etc)

OF CHILDREN IN PETITION

Enter the number of children who were identified in the adoption petition.

FINALIZATION DATE

Enter the date the adoption was finalized.

AGENCY PLACING CHILD (F12)

Enter the name of the agency that placed the child for adoption.

MISCELLANEOUS

BIRTHMOTHER – BIRTHYEAR

Enter the birth year for the birthmother.

BIRTHMOTHER – ETHNICITY (F12)

Enter the ethnicity code(s) for the birthmother. *Up to six (6) codes can be entered.*

BIRTHMOTHER – MAR. ST. (F12)

Enter the marital status for the birthmother.

BIRTHMOTHER - TPR DATE

Enter the date the birthmother's rights were terminated.

BIRTHFATHER – BIRTHYEAR

Enter the birth year for the birthfather.

BIRTHFATHER – ETHNICITY (F12)

Enter the ethnicity code(s) for the birthfather. *Up to six (6) codes can be entered.*

BIRTHFATHER – MAR. ST. (F12)

Enter the marital status for the birthfather.

BIRTHFATHER - TPR DATE

Enter the date the birthfather's rights were terminated.

BIRTHMOTHER MARRIED AT TIME OF BIRTH (Y/N/U)

Enter "Y" (yes) if the birthmother married at the time of the child's birth, "N" (no) if the birthmother was not married at the time of the child's birth or "U" (unknown) if it is not known if the birthmother was married at the time of the child's birth.

STATE AGENCY INVOLVEMENT (Y/N)

Enter "Y" (yes) if there is Montana state agency involvement with the adoption or "N" (no) if there is no Montana state agency involvement with the adoption. This includes subsidy payments.

DFS ORDER TO INVESTIGATE (Y/N)

Enter "Y" (yes) if the Montana state agency has received an order to investigate or "N" (no) if the Montana state agency did not receive an order to investigate.

SUBSIDY (Y/N)

Enter "Y" (yes) if there is an adoption subsidy being paid or "N" (no) if there is not an adoption subsidy being paid.

AMOUNT

If "Y" (yes) is entered in the SUBSIDY field, enter the monthly amount of the subsidy.

TITLE IV-E (Y/N)

Enter "Y" (yes) if the child is IV-E eligible for the adoption subsidy or "N" (no) if the child is not IV-E eligible for the adoption subsidy.

CHILD PLACED FROM – ST (F12)

Enter the state the child came from prior to the adoption placement.

CHILD PLACED FROM – CNTRY

Enter the country the child came from prior to the adoption placement.

SIBLINGS PLACED TOGETHER

Enter the number of siblings for this child who were also placed in this adoption placement.

NUMBER DISRUPTIONS

Enter the total number of adoption disruptions for this child.

NUMBER PRIOR ADOPTIONS

Enter the total number of prior adoptions for this child.

Additional Information

None.