



## International Adoption Program Evaluation Request Form

Before submitting the information listed below, please contact the Center for Child Development at (262) 432-6600 or [CCDNurses@childrenswi.org](mailto:CCDNurses@childrenswi.org) to discuss the evaluation timeline.

We generally require three business days to complete the assessment and discuss our evaluation with you but may be able to provide feedback more quickly.

Please complete this two-page form and submit it with copies of the items you would like us to review. Keep the originals and a copy of this form for your records.

Below is a checklist of what can be sent:

- Medical records
- Photographs
- Video(s) – Please send video files or links via e-mail
- \$300 donation (payable to The Medical College of Wisconsin)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

\*Please list a phone number, with international area codes if applicable where we can reach you within three days of receipt of your materials to discuss our findings.

### **To submit this form and above materials via e-mail (preferred):**

Send an email to [CCDNurses@childrenswi.org](mailto:CCDNurses@childrenswi.org) with **International Adoption Clinic** in the subject line.

### **To submit this form and above materials via mail:**

International Adoption Clinic  
Center for Child Development, MS 744  
Children's Wisconsin  
P.O. Box 1997  
Milwaukee, WI 53201-1997

### **Materials may also be hand-delivered or sent via FedEx/UPS/Overnight Mail to:**

International Adoption Clinic  
Center for Child Development  
1250 N. 113<sup>th</sup> St., Suite 200  
Wauwatosa, WI 53226

Please include a pre-paid, self-addressed envelope if items are to be returned.

**Center for Child Development**

1250 N. 113<sup>th</sup> St., Suite 200, Wauwatosa, WI 53226 • P: (262) 432-6600 • F: (262) 432-6604 • [childrenswi.org](http://childrenswi.org)

Children's complies with Federal civil rights laws. We do not discriminate based on race, color, national origin, age, disability or sex. Si no habla inglés, se programarán servicios de idiomas en forma gratuita. Llame al (414) 266-7848 (TTY: 414-266-2465). Yog hais tias koj tsis txawj hais lus Askiv, peb yuav teem sij hawm muab kev pab txhais lus pub dawb rau koj. Hu rau (414) 266-7848 (TTY: 414-266-2465).



## Release for Video and Medical Records Reviews

I/We have asked the staff in the Department of Pediatrics at the Medical College of Wisconsin and the International Adoption Clinic at Children's Wisconsin to review the medical history and videos of the child/children whom I/we may adopt.

I/We realize that a review of a brief history and/or video only can identify obvious medical or developmental strengths or weaknesses in a child and can in no way be used to accurately predict his/her medical, developmental, behavioral or psychological outcome. I/We absolve the Medical College of Wisconsin and Children's Wisconsin from any legal responsibility for outcomes in this child/children, which were not predicted by reviewing this history and/or video.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Kids deserve the **best.**