

Request for consideration of a name change for a child being placed for adoption

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| --- | --- |
| Full Name of child |  |
| Date of birth |  |
| Proposed name |  |
| Reason for change  (please give as much detail as possible including proposed name)  NB – Requests will only be considered that meet the criteria as defined in Sec 4 – Change of Name policy |  |
| Views of birth family |  |
| Views of child’s Social Worker/Team Manager  (include full names of workers/Manager) |  |
| Views of Adoption Service  (include full names of workers/Manager) |  |
| Views of prospective adopter (where identified) |  |
| Proposals for managing the change for the child, including explanation in LS book and Later Life letter. |  |

**Date of submission by Family Finder:**

**Head of Service/Assistant Director Decision with reasons:**

Name:…………………………………………………

Signature……………………………………………..

Date:…………………………………………………..