

Child Adoption Certificate

Certificate No.: _____

This is to certify that _____ (Name of Adoptive Parent/s),
residing at _____, have legally adopted the child:

Child's Full Name: _____

Date of Birth: _____

Gender: _____

The adoption was finalized on _____ in accordance with the
relevant laws and regulations.

Issued this _____ **day of** _____, **Year** _____

Authorized Officer

Signature: _____