

# DIRECTIONS

## Completing Partner Agency Agreement with MAPS

- Read agreement in its entirety
  
- Page 1
  - ✓ Date agreement at top of page
  - ✓ Fill in Name of Provider in 1<sup>st</sup> paragraph and 3 times at the bottom
  
- Page 2
  - ✓ List all states in which you are licensed to provide adoption services
  
- Page 8
  - ✓ Fill in cost of home study, parent education, and post placement/post adoption reports under Section VII, Part B
  
- Page 10
  - ✓ Completely fill out entire page with corresponding information
    - Name of Provider
    - Name of Executive Director
    - Executive Director's Signature/Date
    - Name of Agency Representative
    - Mailing Address, Phone Number, and Email Address of Agency Representative
  
- Page 18-20 (Schedule D-Disclosures)
  - ✓ Fill in name of authorized representative twice on top half of page 18
  - ✓ Fill in "no" or "yes" answer to each of the questions starting on the bottom half of page 18 and ending on page 20
  - ✓ **IMPORTANT: If you are a supervised provider (India, China, and/or Peru cases), the Supervised Agency MUST answer**

**“yes” on c. and d. on page 19, and Supervised Individuals  
MUST answer “yes” on a. and b. on page 20**

- Page 21 (Schedule D-Disclosures)
  - ✓ If you have answered “yes” to any of the questions on page 18-20, please disclose information regarding any of these instances. Please feel free to attach supporting disclosure documentation as well.
  
- Pages 1-36
  - ✓ Agency Representative Initials each page of the Partner Agreement (bottom left hand side of each page)
  
- Make a copy of the entire agreement for your files
  
- Gather supporting materials to send with the original signed Partner Agreement
  - Copy of License (for each state in which you provide adoption services)
  - Copy of Liability Insurance
  - Copy of Adoption Education Curriculum - IMPORTANT TO NOTE: The 10 hour minimum cannot exclusively be online course. If using online training courses, they need to be in combination with any of in-person training methods outlined in Schedule F, Part D)
  
- Send original signed Partner Agreement and supporting materials to MAPS:

Libby Walch  
MAPS  
277 Congress Street  
Portland, Maine 04101  
207-775-4101

[libbyw@mapsadopt.org](mailto:libbyw@mapsadopt.org)

*\*Please feel free to contact me if you have any specific questions related to MAPS' Partner Agency Agreement and how to complete it.*