



THE WORLD OF PEDIATRICS

Dr. Lyudmila Vayman

3005 Royal Blvd S., STE 100 Alpharetta, GA 30022

Tel: 770-442-5437 Fax: 770-674-3777

ADOPTION MATERIALS COVER LETTER

Please include this coversheet with any materials that are sent to Dr. Lyudmila Vayman for evaluation. Please make sure that all materials are clearly labeled with individual's name submitting the materials and the child's name and date of birth.

Materials Sent to:
The World of Pediatrics
Dr. Lyudmila Vayman
3005 Royal Blvd. S., STE 110
Alpharetta, GA 30022
Tel: 770-442-5437
Fax: 770-674-3777

Materials Sent From: (Name, Address, Fax#)

Individual(s) requesting adoption evaluation:

Name: _____ Cell Phone: (____) _____

Name: _____ Cell Phone: (____) _____

Child's Name: *First* _____ *Middle* _____ *Last* _____

Date of Birth: _____ Age: _____ Sex: M F Birth Country: _____

Materials included: Medical Records Pictures Video Tape School Records Other: _____

Note: materials submitted will not be returned. Please only send copies.

Forms included: Adoption Client Information Form Consent for Pre-Adoption Evaluation

FOR OFFICE USE ONLY

Date Materials Received: _____ Signed Forms Received? _____ Received by mail, fax, or email? _____

Discrepancies in Receipt of Materials? _____

Fee Due: _____ Amt Paid: _____ Date Paid: _____ Date Receipt sent: _____

Date Called to Discuss Evaluation Results: _____