Saint Louis University Adoption Assistance Request Form

Complete all items below and return with itemized receipts, in U.S. dollars, and a certified copy of the adoption placement decree or court order to the University Benefits office, 3545 Lindell Boulevard, Wool Center, 1st Floor.

	Agency or Non-stepchild Adoptions	
I am applying for financial re	eimbursement for an adoption, confirming that	
	(Child's Name)	
whose birth date is	, was placed in my home for the purpose of adoption on	The date
(Child's	Birth Politicative to a 1	