



Exhibit D

TO SUPERVISED PROVIDER AGREEMENT

DISCLOSURE OF PAST SANCTIONS, CHARGES AND INVESTIGATIONS (Supervised Provider -- Hague Suitability Standard, 22 CFR Section 96.35)

Date of Report: _____

Name of Supervised Provider: _____

Former Name(s) of Supervised Provider: _____

Name of Person Making Report: _____

Capacity of Person Making Report: _____

I, the undersigned, being duly sworn on oath hereby depose and state that I serve the above-named supervised provider in the capacity specified above. I hereby report to Children's Home Society of Minnesota, all suitability information required by the Hague Convention U.S. implementing regulations, 22 CFR Part 96, including Section 96.35, and agreed to in Warranty 8 and Agreement 1.3 of the Supervised Provider Agreement, with regard to all matters prior to the date of this report and as pertaining to the agency's current and all former names. I understand that my agency is under an ongoing obligation to report any future sanctions, charges, investigations or other matters described in this disclosure statement. I understand that the information will be utilized to permit Children's Home to evaluate the suitability of my agency prior to entering into a formal agreement for the provision of adoption services.

A. SANCTIONS AND ACTIONS TAKEN AGAINST THE AGENCY

This section is for reporting sanctions and actions taken against the supervised provider named above. Sanctions against specific individuals are covered in Section B., below.

1. Loss of right to provide adoption services. List any and all instances in which the supervised provider lost the right to provide adoption services in any State or country. For each instance, include: (a) date, (b) State or country, (c) name and contact information for terminating authority, (d) basis for the termination, including notification documentation received from the terminating entity. If none, please indicate N/A.

2. Denial of authority to provide adoption services. List any and all instances in which the supervised provider was denied the authority to provide adoption services in any State or country. For each instance, include: (a) date, (b) State or country, (c) name and contact information for authority providing the denial, (d) basis for the denial, and (e) final or current disposition of the denial. If none, please indicate N/A.

3. Suspensions and sanctions for cause. List any and all suspensions for cause or other negative sanctions against the supervised provider imposed by a licensing or oversight authority. For each instance or incident, include: (a) date, (b) State or country, (c) name and contact information of relevant licensing or oversight authority, (d) basis for the suspension or sanction, (e) final or current disposition of the suspension or sanction, and (f) a copy of any corrective action required. If none, please indicate N/A.

4. Disciplinary actions. List any and all disciplinary actions taken against the supervised provider in the past ten years. For each such action include: (a) date, (b) State or country, (c) name and contact information of relevant authority imposing the disciplinary action, (d) basis for the disciplinary action, (e) final or current disposition of the disciplinary action, and (f) any corrective action required. If none, please indicate N/A.

5. Written complaints. List any and all written complaints against the supervised provider in the past ten years relating to adoption services provided by the supervised provider. Written complaints in this context is intended to mean any complaint filed with any State, Federal, or foreign regulatory body of which the supervised provider was notified, but does not include written demands for compensation or reimbursement made by a client of the supervised provider or by an attorney on behalf of a client of the supervised provider. For each such complaint include: (a) date, (b) relevant State or country, (c) name and contact information of regulatory, licensing or oversight authority to whom complaint made, (d) nature and details of the complaint, and (e) final or current disposition or resolution of the complaint. If none, please indicate N/A.

6. Investigation, charges, lawsuits. List any and all of the following past or pending investigations against the supervised provider in the past ten years relating to adoption or child welfare-related services provided by the supervised provider. If none, please indicate N/A.

- Investigations by Federal or public domestic authorities
- Criminal charges in any jurisdiction
- Child abuse charges in any jurisdiction
- Lawsuits

For each, include: (a) date, (b) relevant State or country, (c) name and contact information of relevant court, agency, or authority involved, (d) nature and details of the claim, charge, or investigation, and (e) final or current disposition or resolution of the claim, charge, or investigation.

7. Determinations of guilt or culpability. List any and all determinations or findings of guilt on the part of the supervised provider of any:

- crime under Federal, State, or foreign law
- Civil or administrative violation under Federal, State, or foreign law involving financial irregularities

For each, include: (a) date, (b) relevant State or country, (c) name and contact information of relevant court, agency, or authority involved, and (d) nature and details of the conviction or finding. If none, please indicate N/A.

8. Bankruptcy filings. List any and all bankruptcy filings for the supervised provider during the past five years. For each, include: (a) date, (b) relevant State, (c) case and court number, and (d) final or current disposition. If none, please indicate N/A.

9. Inconsistent activities. List and describe any business or other activities or enterprises -- past or present -- that are inconsistent with the principles of the Hague Convention and which are or were engaged in by the supervised provider, or by any organizations affiliated with the supervised provider, or by any entity in which the supervised provider has an ownership or controlling interest. For each, include (a) type and description of enterprise or activity, (b) State or country where such enterprise or activity takes place, (c) name of entity engaging in the enterprise or activity, (d) relationship to the supervised provider of the entity engaging in the enterprise or activity, and (e) current future plans with regard to such enterprise or activity. If none, please indicate N/A.

10. Third Party Allegations. List and describe any allegation, whether made directly to the provider or learned about through other means (media, third party, etc.), that alleges or implies any criminal wrongdoing or any actions that are inconsistent with the Convention, foreign law, or the provision of adoption services. For each, include (a) description of allegation, (b) name of entity or individual making allegation (c) relationship of the entity or individual making allegation to the supervised provider, and (d) copy of documentation (letter, media article, etc.) by which supervised provider was notified of such information. If none, please indicate N/A.

B. SANCTIONS AND ACTIONS AGAINST INDIVIDUALS

This section is for reporting sanctions and actions taken against individuals affiliated with the supervised provider under its current or any former names. For each incident or disclosure reported, please list: (a) the name and position of the director, officer, or employee at the supervised provider who was involved, (b) the dates of service or employment of the director, officer, or employee, (c) the date of the incident, charge, etc., (d) the agency, entity, or authority imposing or investigating the charge, and (e) the final or current disposition.

Please report the following with regard to each current and former director, officer, or employee of the supervised provider:

1. Disciplinary proceedings. List any and all external disciplinary proceedings taken against any officer, director, or employee of the supervised provider in the past ten years with regard to adoption-related services. If none, please indicate N/A.

2. Convictions or current investigations. List any and all convictions or current civil or criminal investigations of any director, officer, or employee of the supervised provider who is in a senior financial management position for acts involving financial irregularities. If none, please indicate N/A.

3. Criminal background checks and child abuse clearances. Provide the results of State criminal background checks and child abuse clearances for every director, officer, and employee at the supervised provider who is in a senior management position or who works directly with adopting parents and/or children. If none, please indicate N/A.

4. Federal criminal background check request forms. Provide and keep on file a completed FBI Form FD-258 for each U.S. director, officer, and employee at the supervised provider who is in a senior management position or who works directly with adopting parents and/or children. If none, please indicate N/A.

5. Lawyer authorization. If a lawyer, for every jurisdiction in which he or she has ever been licensed or otherwise authorized, provides a certificate of good standing or an explanation of why he or she is not in good standing, accompanied by any relevant documentation and/or any disciplinary action considered by a licensing, authorization, or other oversight entity, regardless of whether the action relates to intercountry adoption. If none, please indicate N/A.

6. Social Worker authorization. If a social worker, for every jurisdiction in which he or she has been licensed or otherwise authorized, provides a certificate of good standing or an explanation of why he or she is not in good standing, accompanied by any relevant documentation, regardless of whether the action relates to intercountry adoption. If none, please indicate N/A.

7. Inconsistent activities. List and describe any business or other activities or enterprises that are inconsistent with the principles of the Hague Convention and which have been or are currently engaged in by any director, officer, or employee of the supervised provider. For each, include (a) type and description of enterprise or activity, (b) State or country where such enterprise or activity takes place, (c) name of person engaging in the enterprise or activity, (d) position at the agency of the person engaging in the enterprise or activity, and (e) current future plans with regard to such enterprise or activity. If none, please indicate N/A.

Printed Name, Authorized Agency Representative

Signature, Authorized Agency Representative

Title

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20 _____ .

Notary Public

My commission expires:

SEAL: