State of Illinois Department of Children and Family Services

Annual Report for Illinois Licensed Adoption Agencies

		Date: 6/30/21				
Name of A	gency:	Lawrence Hall				
Corporate	Address	*: 4833 N. Francisco Ave. Chi	cago, IL 60625			
Illinois DC License/Pre		O number: 012231	Teleph	none: 773-769-3500		
License Ef	fective d	ate:7/1/20	to	6/30/21		
The reporti year. Speci	ing perio	ed and answers to all question tes of your agency's fiscal y	ons for this report rear and reporting	relate to the agency's most recent fiscal period for this report: FY24		
*If the agaddresses	ency op- of all otl	erates satellite or branch her offices.	offices, please att	ach a separate sheet listing complete		
Departmen each licens filed annua to provide suspension	ot of Chil sed agence ally, no lather ann of an a	dren and Family Services as by that maintains a website stater than the 45th day follow all report or disclose certa	nd with the Illinois thall provide this raining an adoption again information re	n services and shall be filed with the Attorney General's Office. In addition, eport on its website. The report shall be gency's license anniversary date. Failure quired in the report may result in the Subsequent violations may result in a		
This repor	t applie	s only to the provision of a rvices.	doption services a	and includes agencies providing foster		
and home conversion	study so adoption	ervices-only programs. Qu	estion number 1 loption services or	ional agency-assisted adoption services, (A-M) does not pertain to foster care ally through foster care conversions must		
Please resp as requeste	ond to th d:	ne following questions with a	yes or no answer	on the left and provide additional detail		
Yes 1.	Non-id	entifying information for the	e past year concern	ning adoption is attached:		
	Domes A.	tic Agency-Assisted Adopti The number of adoptive far are not yet licensed: 12	ions milies who have su	ubmitted an agency application but who		
	B.	The number of adoptive far as of the agency's fiscal year	milies who are lice ar end:9	ensed and awaiting domestic placement		
	C.	The number of biological reporting period for domest	parents who the a	agency provided services to during the		
	D.	The number of children place Adoptive parents/families we Adoptive parents/families we	ho are Illinois Res	sidents: 20		

	E. The number of adoptions initiated during the year: Adoptive parents/families who are Illinois Residents: 16 Adoptive parents/families who are non-Illinois Residents: 1					
	F. The number of adoptions finalized during the year: Adoptive parents/families who are Illinois Residents: 9 Adoptive parents/families who are non-Illinois Residents: 0					
	G. The number of adoptive placement disruptions:1_					
	H. The number of domestic adoption dissolutions this year:					
	Check the boxes that apply to the intercountry adoption services the agency provides:					
	Child referral/matching placement services;					
	Adoption home study/post placement services (utilized by families who are					
	working with another agency for their referral/match); None.					
	The number of adoptive families who have submitted an agency application but who are not yet approved or licensed: The number of adoptive families who are licensed or approved and awaiting international placement: The number of international adoptive placements made during the year:					
	List the countries with which you have accredited international adoption programs:					
		_				
	The number of international adoptions finalized this year in the U.S., specifying the countries of origin:	25				
	The number of finalizations in other countries, specifying the countries of origin:					
	The number of international adoptive placement disruptions:					
No 2	Has the agency:					
	lost the right to provide adoption services in any state or country,					
	 had its license suspended for cause, or was the agency the subject of other sanctions by any court, governmental agency, or 					
	governmental regulatory body relating to the provision of adoption services? If the answer to any portion of this question is yes, attach a full and complete statement of explanation.					

E.

	3,	During the past year, were any actions related to licensure initiated against the agency by a licensing or accrediting body? If the answer is yes, attach a complete statement of explanation.				
No	4.	During the past year, has the agency been a named party in any civil court actions in relation to the provision of foster care or adoption services? If the answer is yes, attach a complete statement of explanation.				
No	5.	Is the agency currently the subject of a pending investigation by federal or state authorities? If the answer is yes, attach a complete statement of explanation.				
No	6.	Were there any criminal charges, child abuse charges, malpractice complaints, or lawsuit related to the provision of adoption services against the agency or any of its employees officers, or directors during the past year? If the answer is yes, attach a complete statement of explanation and the basis or disposition of the actions.				
No_	7.	Was the agency found liable for any civil or administrative violation or found guilty of or pled guilty to any criminal or administrative violation that relates to the provision of adoption services under federal, state or foreign law? If the answer is yes, attach a complete statement of explanation.				
No	8.	Was any employee, officer or director of the agency found guilty of any crime or determined to have violated a civil law or administrative rule relating to the provision of adoption services under federal, state or foreign law? If the answer is yes, attach a complete statement of explanation.				
No	9.	Was any civil or administrative proceeding relating to adoption services instituted by the agency during the year (excluding uncontested adoption proceedings and proceedings filed pursuant to Section 12a of the Adoption Act)? If the answer is yes, attach a complete statement of explanation.				
Yes	10.	The agency's website address is: www.lawrencehall.org				
	Н.	. An audited financial statement for the prior fiscal year, including a general description of fees, wages, salaries and other compensation described in Rule 401.565(a), certified by an independent public accountant, is attached.				
	12.	This Annual Report with attachments and audited financial statement, certified by an independent public accountant, has been posted on the website listed in item 9.				
	13.	Effective August 15, 2005, Annual Reports are available upon request.				
Informa Care Ac	ition et an	contained in this report is subject to the applicable confidentiality requirements of the Child of the Adoption Act.				
I certify that the above statements are true and accurate, based on information available to me at this time.						
Кага Те	-					
Printed	or ty	yped name of Executive Director 06 /01/23				
S gnature of Executive Director Date						
Mailing Instructions on the back						

This report is to be mailed to the child welfare agency's A&I licensing Unit and the Illinois Attorney General's Office:

Illinois Attorney General Charitable Trust Bureau 100 W. Randolph Street, 11th Floor Chicago, IL 60601 312-814-2595 or 312-814-3000

DCFS Agency and Intuitional Licensing Units:

Cook County	Northern Region	Central / Southern Region
A&I Licensing Unit A&I Licensing Supervisor 1911 S. Indiana Ave. – 9th Fl. Chicago, IL 60616	A&I Licensing Unit A&I Licensing Supervisor 1619 W. Jefferson Street Joliet, IL 60435	A&I Licensing Unit A&I Licensing Supervisor 1124 N. Walnut Springfield, IL 62702