

FOSTER PARENT APPLICATION

Name: _____ Date: _____

Address: _____

Husband

Wife

Birth date: _____

Birthplace: _____

Years at
This resident: _____

SS#: _____

Driver's
License #: _____

Employer: _____

Length of
Employment: _____

Work Phone: _____

Can you be called at work? Yes ___ No ___

Yes ___ No ___

HUSBAND'S Previous Employment: (List most recent experience first)

Name and Address of Employer

Job Title and Type of Work

Date

Do other people watch your children? Yes ___ No ___ (If yes, give names, relationship and place): _____

Who will care for your foster children in your absence or in the case of an emergency?

Name: _____ Relationship: _____

Address: _____ Phone: _____

EDUCATION: (List High Schools & Colleges, Business or Bible Schools that you have attended)

YEARS MARRIED: _____ Previously Married? Yes ___ No ___

Children: (Names & Ages, including grown children not living with you)

Do you have young children living with you? Yes ___ No ___ (If yes, please explain) _____

Have you ever applied to become foster parents with another agency or the County? Yes ___ No ___ (If yes, please explain) _____

Have you ever been licensed or certified previously? Yes ___ No ___

Please describe any experience or education you have relative to foster care, parenting or youth work: _____

If you attend church, please describe the church and the nature of your involvement: _____

Please describe your preferences for a foster child and/or any limitations on the type of child placed with you: _____

Do you keep firearms in your home? Yes ___ No ___

Do you have a swimming pool? Yes ___ No ___

Have you ever been denied a license from the State of California, Department of Community Care licensing or any private agency for any type of child care? Yes___ No___

Have you, or any adult in the household, ever been reported to, or investigated by, Children's Protective Services, for any reason, that you know of? Yes___ No___ (If yes, please explain) _____

Have you or any adult in the household ever been arrested or had convictions, other than minor traffic violations, for which the fine was \$50.00 or more? Yes___ No___

Personal References: (Please supply names and addresses of three **unrelated** people that you have personally known for at least three years)

May we contact them? Yes___ No___

1. Name: _____
Address: _____
City: _____ Zip Code: _____
Nature of Acquaintance: _____

2. Name: _____
Address: _____
City: _____ Zip Code: _____
Nature of Acquaintance: _____

3. Name: _____
Address: _____
City: _____ Zip Code: _____
Nature of Acquaintance: _____

I hereby certify that the information provided is correct to the best of my knowledge. I hereby give Krista permission to contact references.

Applicant's Signature(s):

Date

Date