

**GRANDFATHER HOME FOR CHILDREN
Foster or Adoptive Parent Application**



We understand that this application in no way obligates us as foster or adoptive parents or Grandfather Home for Children as a licensing agency, but is a statement of intention. This application may be withdrawn by us at any time.

GENERAL INFORMATION

LAST NAME _____ DATE _____

PHYSICAL ADDRESS

_____ Street _____ City _____ Zip

MAILING ADDRESS (if different from physical address)

_____ Street _____ City _____ Zip

Directions to your home _____

Home Telephone _____

Cell Phone _____

Length of residence in NC _____

Cell Phone _____

Email Address _____

Email Add 2 _____

REFERRAL INFORMATION

Please let us know how you heard about fostering with Grandfather Home for Children: _____

GRANDFATHER HOME FOR CHILDREN

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HOUSEHOLD/FAMILY COMPOSITION

Prospective Foster Father

Prospective Foster Mother

Full Name		Full Name	
Date of Birth		Date of Birth	
Place of Birth		Place of Birth	
Race		Race	

Marital status: Single Married Divorced Widowed Separated

Children In Home:

<u>Name</u>	<u>Date of Birth</u>	<u>School grade or occupation</u>

Children living out of home:

<u>Name</u>	<u>Date of Birth</u>	<u>Occupation</u>	<u>Address</u>

Other members of Household:

<u>Name</u>	<u>Date of Birth</u>	<u>Relation to Family</u>	<u>Grade or Occupation</u>

Our family Owns Rents

Our House Apartment Condominium Mobile Home

Number of Rooms _____

Number of Bedrooms _____

Present sleeping arrangements: _____

Bedroom 1

Bedroom 2

Bedroom 3

Bedroom 4

In which bedroom would foster child (ren) sleep 1 2 3 4

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COMMUNITY INFORMATION

Pastor's Name _____ Church _____ Phone _____
Are you an active member of this church? Yes No

HEALTH INFORMATION

Has either prospective parent had any serious illness, operation or chronic physical condition? If so please describe:

1. Have you ever had an open case, been accused of, charged with or found guilty of abuse, exploitation or neglect of a child? Yes No
Felony? _____
Misdemeanor? _____
 2. Have you ever had an open case, been accused of, charged with or found guilty of abuse, exploitation or neglect of an adult? Yes No
Felony? _____
Misdemeanor? _____
 3. Have you ever been charged with or found guilty of domestic violence? Yes No
Felony? _____
Misdemeanor? _____
 4. Have you ever had a child removed from your home as a result of a juvenile court or CPS investigation? Yes No
Felony? _____
Misdemeanor? _____
 5. Have you ever been charged with a traffic violation? Yes No
What was the violation? _____ What year? _____
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FAMILY INCOME and EMPLOYMENT

Prospective Foster Father
Occupation _____
Employer _____
Address _____
Length of time at current job _____
Business Phone _____

Prospective Foster Mother
Occupation _____
Employer _____
Address _____
Length of time at current job _____
Business Phone _____

Monthly net income for your family: _____

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I/We understand that in making this application there is no formal commitment on my/our part to accept licensure as a foster parent (s) or on Grandfather Home's part to license me as a foster parent (s).

Signature of Prospective Father

Signature of Prospective Mother

Date

Date

If you have questions about items on this application or about foster care, please call Tammy Cody at 828-231-5316

Please return completed application to
Michelle Davison
PO Box 98
Banner Elk, NC 28604
Or fax it to 828-898-6140