

Others In Home

Name	Date of Birth	Employer/School	Relationship

Preferences as to number of Children, ages and sex:

Interested in: Foster Care Foster Care/Adoption Adoption

Why are you interested in keeping foster children? _____

How did you learn about our Foster Care Program? _____

Have you been foster parents previously? Yes No

If Yes, Name of Agency: _____

Would you consent to us contacting that Agency? Yes No

Did a current Foster Parent refer you to our agency Yes No

If Yes, Name of Referral: _____

We certify that the information supplied is accurate to the best of our knowledge. We also give our consent for the agency to complete a criminal record check and a check of the North Carolina Central Registry of Child Abuse and Neglect.

Signature _____

Signature _____

Date _____