



ADOPTIVE HOME APPLICATION

(All information herein is strictly confidential.)

Prospective Parent 1 Name (first, middle, last)	
Prospective Parent 2 Name (first and maiden)	

I. CURRENT SITUATION

A. RESIDENCE: Address: _____
(Number and Street) (City) (County) (State) (Zip Code)

Telephone

Number(s): _____ E-mail: _____
(Home Number) (Work Number) (Cell Number)

How long at this address: _____ Number of Rooms: _____

Check One: House Check One: Own Monthly Payment: \$ _____
 Apartment Rent Mortgage Balance: \$ _____

If less than 3 years at above address, list former addresses for 5 years.

B. PRESENT MARRIAGE: Date of Present Marriage: _____ Attach copy of marriage certificate.
(If applicable)
 Describe briefly any separations, including dates and duration. Copy attached

List children of Present Marriage

Child's Name	Child's Date of Birth	Natural or Adopted
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. Name of Others in Home

Name of Others in Home	Date of Birth	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Prospective Parent 1 Religious Affiliation: _____ Prospective Parent 2 Religious Affiliation: _____

E. INTERESTS:	Prospective Parent 1	Prospective Parent 2
Community (clubs, lodges, etc.)		
Hobbies or Special Interests		

F. HEALTH: Attach completed physician's reports for both adults, if a physical is necessary. Report Attached

G. EMPLOYMENT: If current employment is less than 3 years, list former employment for 10 years.

	Prospective Parent 1	Prospective Parent 2
Current Employment		
Prior Employment (if applicable)		

H. FINANCIAL STATUS – ASSETS:

		Prospective Parent 1	Prospective Parent 2
INCOME	Gross Yearly Salary		
	Interest or Dividends		
	Rental Income		
	Other		
CAPITAL	Real Estate at Market Value		
	Savings		
	Other Investments	(list on separate sheet and attach to this application)	(list on separate sheet and attach to this application)
INSURANCE	Life		
	Accident		
	Hospitalization		
	Other (specify)		

FINANCIAL STATUS – LIABILITIES: Itemize on separate sheet and indicate payment plan. Attach sheet to this application.

Debts Totaled	Exclude home mortgage.	Exclude home mortgage.
Other Obligations		

II. LIFE HISTORY

A. Prospective Parent 1 Birthdate: _____ Prospective Parent 1 Birthplace: _____
 Prospective Parent 2 Birthdate: _____ Prospective Parent 2 Birthplace: _____

B. RACE/ETHNICITY:

	White	Black or African American	Hawaiian or Pacific Islander	Hispanic	Asian	American Indian or Alaskan Native	Other
Prospective Parent 1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prospective Parent 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. EDUCATION: Last Grade Completed or Degree Special Training, if any

Prospective Parent 1		
Prospective Parent 2		

D. MEDICAL HISTORY — PHYSICAL and PSYCHIATRIC — MAJOR MEDICAL CONDITIONS

	Condition Treated for	Date Treated	Inpatient or Outpatient	Place Treated
Prospective Parent 1	1.			
	2.			
	3.			
	4.			
	5.			
	6.			
Prospective Parent 2	1.			
	2.			
	3.			
	4.			
	5.			
	6.			

E. PREVIOUS MARRIAGES: Attach documentation of death or divorce.

	Previous Spouse's Name	Date and Place Married	Date and Place Marriage Terminated
Prospective Parent 1			
Prospective Parent 2			

Children of Previous Marriage:

	Child's Name	Age	Whereabouts	Support Payments	Describe continuing contact if out of home
Prospective Parent 1					
Prospective Parent 2					

F. ARREST RECORD: (violations of law other than minor traffic violations)

Prospective Parent 1: Yes No Civil Rights Restored? Prospective Parent 1: Yes No

Prospective Parent 2: Yes No Prospective Parent 2: Yes No

If either prospective parent has an arrest record, provide details below:

Prospective Parent's Name	Where Arrested	Date Arrested	Nature of Charge	Disposition

III. REFERENCES (two must be non-relatives)

Name	Address	Telephone Number
Prospective Parent 1 Employer		
Prospective Parent 2 Employer		

IV. ADOPTION

Do you know anyone well who is adopted? Yes No If yes, who? _____ Have you ever applied to adopt a child from another source? Yes No If yes, when? _____

What source? _____

What children would you like us to consider for your family (age, sex, siblings, disabilities, etc.)?

What children would you not like us to consider for your family (age, sex, siblings, disabilities, etc.)?

I understand the importance of providing complete information and attest that the information provided above is accurate to the best of my knowledge. I understand, in accordance with Section 837.06, Florida Statutes, that making false statements in writing with the intent to mislead a public servant in the performance of his official duty is a misdemeanor of the second degree, punishable as provided in Sections 775.082, 775.083, or 775.084, Florida Statutes.

Prospective Parent 1 Signature

Prospective Parent 2 Signature

Date Signed



ADOPTIVE HOME APPLICATION

(All information herein is strictly confidential.)

Date: _____

I, We _____
Prospective Parent 1 First Name Middle Name Last Name

Prospective Parent 2 First Name Middle Name Last Name

Residing at _____

County: _____

Have read and understand the following:

IMPORTANT NOTE: Pursuant to the Multi-Ethnic Placement Act of 1994 and the Small Business Job Protection Act of 1996, Section 1808, "Removal of Barriers to Interethnic Adoption," race, culture or ethnicity may not be used as the basis for any denial of placement, nor may such factors be used as a reason to delay a foster or adoptive placement. Discrimination is not to be tolerated, whether it is directed toward adults who wish to serve as foster or adoptive parents, toward children who need safe and appropriate homes, or toward communities or populations that may previously have been under-utilized as a resource for placing children.

Prospective Parent 1 Signature

Prospective Parent 2 Signature