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Child's legal status:      Legally Free                    Not Free

Termination Date: (If not free, date anticipated) \_\_\_\_\_

State of Jurisdiction: \_\_\_\_\_ Custody Jurisdiction: \_\_\_\_\_

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Family Type: (Preference for family composition, check all that apply)

- No Preference                                    Couple  
 Single Female                                    Single Male

Other Children:

- No Preference                                    No other children                                    Must be youngest  
 Must be oldest                                    Female siblings only                                    Male siblings only  
 Must have other children

Religious Preference:

- Catholic                                            Christian                                            Hindu  
 Jewish                                            Jehovah's Witness                                    Latter Day Saints  
 Muslim                                            Protestant                                            Other  
 None

Is it important that a family be multilingual? (Does the family need to speak a language other than English?)

- Yes                    No                    Do not know                    Negotiable

The information below, while not mandatory, will help to insure that you receive the most appropriate match possible.

Primary Language:

- English                                            American Sign Language (ASL)                                    Spanish  
 Russian                                            French                                            Korean  
 Chinese                                            Vietnamese                                            Other \_\_\_\_\_

Secondary Language:

- English                                            American Sign Language (ASL)                                    Spanish  
 Russian                                            French                                            Korean  
 Chinese                                            Vietnamese                                            Other \_\_\_\_\_  
 None

Circle grade level:

Ungraded, Preschool, K, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, Not in school

Current placement setting:

- Foster home                                    Therapeutic foster home                                    Medical foster home  
 Group home                                    Residential treatment                                    With birth family/relative  
 Hospital, medical                                    Hospital, psychiatric                                    Children's rehab.  
 Youth shelter                                    Boarding school                                    Drug/alcohol rehab.  
 Wilderness program                                    Juvenile justice facility                                    Jail  
 Other \_\_\_\_\_

Years in care: \_\_\_\_\_ Number of Adoption Disruptions: \_\_\_\_\_ Number of Placements: \_\_\_\_\_

Are there significant relationships the child needs to maintain?    Yes    No   If yes, what is their relationship? \_\_\_\_\_

Child's Pet Allergies:

- None                    Dogs                    Cats                    Unknown                    Other \_\_\_\_\_

Allergies to Smoke:    Yes                    No

Child's Food Allergies:

- None
- Peanut
- Dairy
- Wheat
- Shellfish
- Phenlalanine
- Other

Available Subsidy:

- None
- Eligible for both subsidy & SSI
- Eligible for SSI
- Eligible for medical card only
- Eligible for subsidy
- Subsidy status unknown

Additional subsidy information: \_\_\_\_\_

Purchase of Service available:

- Do not know
- Eligible for P.O.S.
- P.O.S. negotiable
- P.O.S. w/conditions

If available, enter information here about amount of purchase of service and conditions:

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**DISABILITIES**

**Risk Factors Disabilities:**

- Alcohol exposed
- History of multiple placements
- Mental Illness in birth family
- Schizophrenia in birth family
- Drug exposed
- History of abuse or neglect
- Mental Retardation in birth family
- HIV Exposed
- Lead poisoning
- Premature birth
- Other \_\_\_\_\_

**Physical Disabilities:**

- Asthma
- Cleft lip
- Diabetes
- Failure to thrive
- Speech disorder
- Developmental Disabilities
- Other \_\_\_\_\_
- Autism
- Cleft palate
- Encopresis
- Fetal Alcohol Effect
- Visually impaired
- Attention Deficit Disorder
- Cystic Fibrosis
- Enuresis
- Fetal Alcohol Syndrome
- Pervasive developmental disorder
- Cerebral Palsy
- Deaf/Hearing loss
- Epilepsy
- Hyperactivity
- Special Equipment (braces, wheelchair, hearing aid, etc.):* \_\_\_\_\_
- Physical Therapy ( describe the type):* \_\_\_\_\_
- Speech Therapy (same):* \_\_\_\_\_
- Occupational Therapy (same):* \_\_\_\_\_

Current Overall Level of Physical Disability:

- None
- Mild
- Moderate
- Severe

**Emotional Disabilities:**

- Adjustment Disorder
- Behavior Problems
- Depression
- Fetal Alcohol Syndrome
- Obsessive Compulsive Disorder
- Reactive-Attachment Disorder
- Developmental Disabilities
- Other \_\_\_\_\_
- Attachment Disorder
- Bipolar Disorder
- Emotional Problems
- Oppositional Defiant Disorder
- Seizure Disorder
- Attention Deficit Disorder
- Borderline Personality Disorder
- Failure to thrive
- Hyperactivity
- Post Traumatic Stress Disorder
- Speech Disorder
- Autism
- Conduct Disorder
- Fetal Alcohol Effect
- Loss Issues



