



The Children's Aid Home Programs of Somerset County Inc.

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(Family Approval Document Section II)

RESOURCE PARENT AUTOBIOGRAPHY

FULL LEGAL NAME (first, middle, last): _____

NICKNAME/PREFERRED NAME: _____

PREFERRED PRONOUNS: _____

GENDER: _____

What brought you to our agency and what is your knowledge of our programs?

YOUR EMPLOYMENT HISTORY

Please list all current and previous jobs. Include the company, job title, dates employed, city, and state. Use the back of this autobiography form or a separate sheet to add additional jobs and work experience.

- 1.
- 2.
- 3.
- 4.

Other than yourself, please list everybody, including foster children, who resides in your home. Also list any children you have who no longer reside with you, and where they live now. (Corresponding to Family Approval Document Section II, IV, and V)

<u>Name</u>	<u>Date of birth</u>	<u>Relationship to you</u>	<u>How long have they lived with you?</u>	<u>For adult children, where do they live now?</u>

RESOURCE PARENT'S BACKGROUND INFORMATION:

YOUR PARENTS

Parent's full name: _____	Parent's full name: _____
Birthdate: _____	Birthdate: _____
Place of birth: _____	Place of Birth: _____
Occupation/career: _____	Occupation/career: _____
Current address: _____	Current address: _____
_____	_____
_____	_____
_____	_____

YOUR SIBLINGS

(You can use the back of this autobiography form or a separate sheet to add additional siblings)

Full name of sibling: _____ Marital status: _____

Birthdate: _____ Occupation: _____

Current address: _____

Partner's name: _____ Partner's occupation: _____

Children of sibling:

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

Full name of sibling: _____ Marital status: _____

Birthdate: _____ Occupation: _____

Current address: _____

Partner's name: _____ Partner's occupation: _____

Children of sibling:

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

Full name of sibling: _____ Marital status: _____

Birthdate: _____ Occupation: _____

Current address: _____

Partner's name: _____ Partner's occupation: _____

Children of sibling:

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

Name: _____ Gender: _____ Birthdate: _____

PREPARATION FOR FOSTER CARE/ADOPTION (Corresponding to Family Approval Document Section VI)

Please list books read, training, or research, you have done to prepare for foster care/adoption.

ATTITUDES TOWARD PERMANENCY (Corresponding to Family Approval Document Section VIII)

What factors are motivating you to provide permanency to a child in care? If infertility or miscarriages played a role in your motivations, please explain.

What is your understanding of the needs of special needs children? (Every child in care is considered to have special needs, whether or not they have formal diagnoses)

Why are you interested in providing permanency to a child with special needs?

Do you feel you have an adequate understanding of the children in care and the specialized care they may require?

Please describe a specific situation or occurrence that led to your decision to provide permanency for a child with special needs.

Have you had any experience or contact with children who have special needs? If so, please explain.

Please describe a difficult time in your life and how you overcame it.

Please explain your understanding of the commitment needed to parent a child with special needs, and the importance of commitment in parenting a child with special needs.

Have you had experience corresponding with birth parents in current or past placements? If so, please explain.

What methods would you use to build a relationship with the birth family and kin?

How would you negotiate difficult situations with the birth family and kin? Please provide an example of a situation where you had to make a compromise or negotiate.

Would you consider a post-adoption contact agreement (PACA)? (A PACA is a legally binding agreement to maintain contact with the birth family after an adoption).

Please describe your parenting style and experience.

Please describe any personal experiences that have prepared you for parenthood?

What can you use from the above experiences to aid you in providing permanency for a child with special needs? If your own child or someone in your home has special needs, please describe your interactions with them.

Please describe your support system (i.e. extended family, church, agency involvement).

Once permanency occurs, there will be decreased agency involvement. Please describe your plan for support after this decreased involvement occurs.

Have you ever experienced a previous adoption and/or foster care disruption? If so, please describe the circumstances of the disruption, and if you received any follow up or support.

FAMILY STRENGTHS (Corresponding to Family Approval Document Section IX)

Please write something about yourself that will provide a better understanding about you as a person, and as a parent (personality, values, etc.).

Please give an example of how you have demonstrated the above qualities in a past experience and as a parent.

We ask you to discuss the following issue because children in foster care have experienced loss in their lives. Please discuss any significant grief and/or loss you have experienced in your life and how you have worked through those difficult times. For example, the loss of a job, home, pet, loved one, income, or relationships.

Please describe your day-to-day stress and the resources you use to manage it.

Please describe a difficult time in your life and how you resolved it. If it has not been resolved, please describe how you manage it.

What special accomplishments have you achieved in your life? How do your accomplishments demonstrate attributes that may contribute to the success of parenting a child with special needs?

Describe any areas of expertise you have that would allow you to parent a child with particular special needs.

Please list the names of all the schools you attended, from elementary through college and/or trade school. Provide graduation dates and degrees or certificates earned, if any.

HEALTH INFORMATION (Corresponding to Family Approval Document Section X)

Does anyone in your household have special medical needs or conditions? This includes significant health concerns such as cancer, heart disease, high blood pressure, diabetes, etc. If so, what are they and how are their needs being met?

Does anyone in your household have special mental health needs or conditions? If so, what are they and how are their needs being met?

Is anyone in your family on any medication? If so, please list the medications and what they are for.

Is anyone in your household diagnosed with a communicable disease? If so, how is the disease treated?

Are there any specific family issues resulting from any of the above health conditions/mental health needs that you feel would impact your ability to parent a child with special needs either positively or negatively?

HOME ENVIRONMENT (Corresponding to Family Approval Document Section XI)

Do you own or rent your residence? Please describe the following: the style of the home (i.e. two story, ranch), the interior of the home (including room layout), the sleeping arrangements for the children placed in the home, the outside space surrounding the home (including any detached buildings and play/recreational equipment).

Does anyone in your household smoke? If so, please list how much per day and describe where around your home you allow smoking.

Please list and describe your pets (type, names, age, behaviors, and temperament).

If you are currently married, how did you meet your spouse? How long was the courtship and what was your courtship like? What date did you get married? Provide information about your marital relationship, including the strengths and weaknesses of each partner.

Please describe your communication style with your partner and how you make family decisions. If you have been separated, please describe what led to the separation and how you remedied the conflict. Please address any current problems in your marriage.

Please describe how you demonstrate a caring relationship with your partner.

If you were previously married or had a previous significant relationship, please describe what issues led to the break-up. How did you attempt to address the problems in the previous relationship? Do any of your past relationships impact how the members of your household interact?

Have you had children from a previous marriage or relationship? If so, please provide the names of any children from that relationship. Please describe any co-parenting practices that you and your ex-partner employ, if applicable.

Are you a step-parent? If so, please describe your relationship with your step-children. Please describe the relationship between the step-siblings, if applicable.

If applicable, please describe how current family members interact with previous partners and children from previous marriages not living in the household. Please describe how those interactions would impact a child with special needs.

Please describe your interactions with members of your household. Specifically, please address the following: if a child prefers one parent over the other, who fights the most, who is perceived as a favorite, the roles of each child.

Please describe your parenting principles, style, and methods you plan to practice in caring for a prospective foster or adoptive child. Include a discussion of your discipline beliefs and methods.

Please write about your interests and hobbies, both as an individual and a couple.

What are your goals/aspirations for your foster or adopted child?

What are your views on education – immediate and long-term? What are you expecting from the child?

Will you be incorporating religion into your child's life? How?

Is everyone in your home in agreement with your plan to foster or adopt? Describe how other household members feel about fostering/adopting a special needs child.

Is your family currently experiencing any problems, such as, but not limited to, not getting along, infidelity, financial stress, recent trauma, etc.? If yes, please explain.

If applicable, please describe how you provide care, guidance, and protection to the children currently in your home. Have the children in your household been prepared for the arrival of a sibling with special needs?

How would you address trans-racial or trans-cultural needs of a child?

What child care arrangements do you have in place?

If permanency is achieved, do you intend to continue to foster additional children? How would you plan for the individual needs of all children?

COMMUNITY (Corresponding to Family Approval Document Section XII)

How will the composition of your home and family, family functioning, and degree of openness in your community affect your child with special needs?

Please describe your neighborhood (i.e. urban, suburban, or rural). Would you consider your neighborhood safe?

What school would the child be attending? Are you aware if the school has programs to support a child with special needs?

Do you feel your community will meet the social and cultural needs of a special needs child?

RESOURCES (Corresponding to Family Approval Document Section XIII)

What support groups or other resources are available in your community or area for foster/adopted children or foster adoptive/parents? Are you open to utilizing outside resources?

Have you accessed and utilized community services in the past? If so, please describe.

What child care arrangements do you have available? Please discuss when you would use child care, who you would use, and where the child care would occur.

Please list any comments or questions that you may have.