

1. Describe each child's physical and personal characteristics, including special needs (physical description, personality, how they express their feelings, likes/dislikes, hobbies, interests, disabilities, current health status, overall functioning at home and school):

2. Describe your child(ren)'s attitude and feelings regarding the foster/adoption plan.

3. Describe how a foster/adopt placement may impact the child(ren) currently in the home

4. Describe each parent's relationship with each child.

5. Describe your children's relationship with each other.

Absent or part-time children

ABSENT OR PART-TIME CHILDREN

List your children who DO NOT live in your home. Please do not include foster care children.

NAME	AGE	<u>Relationship to Applicant #1</u> Specify birth, step, adopted child	<u>Relationship to Applicant #2</u> Specify birth, step, adopted child	If in school, list the grade and school that each child is attending.

1. Describe each child's physical and personal characteristics, including special needs (physical description, personality, how they express their feelings, likes/dislikes, hobbies, interests, disabilities, current health status, overall functioning at home and school):
2. Describe each parent's relationship with each absent or part-time child(ren).
3. Describe relationship with other children/siblings?
4. Describe your absent or part-time child(ren)'s attitude and feelings regarding the foster/adoption plan.
5. Do you pay child support for any absent or part-time children?

Roomers or Boarders

1. If applicable, list other adults who live or stay in your home.
2. What date did they move in and how long are they planning on staying?

Support Systems

1. Describe your willingness to accept help, suggestions, or counseling from other people (such as social workers, school personnel, therapists, doctors, etc.):
2. Describe your personal, family, and community support systems:
3. How does your support system feel about the foster/adoption plan?

4. Describe how you plan to prepare your extended family/friends/support networks to receive a foster/adoptive child:

5. What is your plan for providing child care while you are away from home or at work (Otter Tail County Human Services does help with daycare costs for foster children)?

Parenting Skills & Hands-on Parenting

1. Describe your experience with supervising and/or parenting children.

2. Describe any particular stresses or problems you have experienced with children and how they were handled?

3. What are your methods of discipline and consequences (check boxes that apply)?

- | | | |
|---|--|---|
| <input type="checkbox"/> Withdrawal of affection | <input type="checkbox"/> Negotiations of expectations | <input type="checkbox"/> Withholding privileges |
| <input type="checkbox"/> Force | <input type="checkbox"/> Force | <input type="checkbox"/> Sending to bed early |
| <input type="checkbox"/> Modeling positive behavior | <input type="checkbox"/> Withholding food | <input type="checkbox"/> Talking with child |
| <input type="checkbox"/> Praise/Demonstration of love | <input type="checkbox"/> Threats | <input type="checkbox"/> Nagging |
| <input type="checkbox"/> Isolation/time outs | <input type="checkbox"/> Spanking | <input type="checkbox"/> Arguing with child |
| <input type="checkbox"/> Demonstration of hurt feelings | <input type="checkbox"/> Scolding | <input type="checkbox"/> Natural consequences |
| <input type="checkbox"/> Silence toward child | <input type="checkbox"/> Additional responsibilities | <input type="checkbox"/> Delay of Punishment |
| <input type="checkbox"/> Giving child options | <input type="checkbox"/> Grounding | <input type="checkbox"/> Swearing |
| <input type="checkbox"/> Rewarding good behavior | <input type="checkbox"/> Giving/taking child's allowance | <input type="checkbox"/> Yelling |

4. Would discipline of foster/adoptive children be any different from discipline of your children?
If yes, please describe:

5. Would expectations/responsibilities of foster children be different from those of your children? Explain.

6. What would you do if a child argues with you, has a temper tantrum or misbehaves in public?

7. What would you do if a foster/adoptive child swears?

8. What would you do if a foster/adoptive child is caught smoking?
9. What would you do if a foster/adoptive child came home drunk or high on drugs?
10. How would you talk to children about sex, sexuality, intimacy and sexual experimentation?
11. How would you feel about a foster/adoptive child using birth control and/or having premarital sex?
12. What would you do if a foster/adoptive child was acting out sexually to you, your spouse, your children, or to their friends?
13. What would you do if a foster/adoptive child became physically aggressive?
14. What is your parenting style? Do you parent as a team or is there a primary caregiver in the family? Describe any differences in parenting styles, roles, and responsibilities between you and your spouse/significant other. (If you do not currently have children, have you discussed parenting with your spouse/partner?)
15. Describe the role of your “hands on” parenting (who plays with a child, who helps a child with homework, who reads to a child, etc.)
16. What about parenting gives you satisfaction or is the most rewarding?
17. What do you feel is the most difficult part of parenting?
18. What are some things you do well as a parent?
19. What are some things you would like to improve upon as a parent?

20. In your opinion, what is a parent's biggest responsibility to a child?

21. How do you:
Encourage children?

Reward children?

Show love and affection to children?

Show support for children?

22. Describe your knowledge of child development.

23. Describe your knowledge, experience and willingness to learn new skills/parenting techniques needed to parent children with special needs (behavioral, emotional, mental, social, development, or physical disabilities).

24. Describe your flexibility to adapt your family life to meet a child's needs.

Adoptive and/or Foster Parenting

1. How did you decide to foster/adopt?

2. How will you make a foster/adopt child feel like a part of your family?

3. What do you hope to experience from providing foster care or adopting?

4. What are the concerns of each family member related to foster/adoptive parenting?

5. How have you prepared your family for providing foster care or to adopt?

6. Are you willing to attend ongoing foster care/adoption training sessions and support groups?
(TRAINING: A minimum of 12 hours per year per foster parent is required.)

7. What are your expectations of and feelings toward birth parents (positive and negative)?
How do you feel about parenting another person's child? Explain your ability and understanding to empathize with the grief and loss experienced by the child, their birth parents, and their extended birth family.

8. How do you feel about supporting and building upon the foster child's relationships with birth family members or former foster families?

9. Are you able to be a partnership with birth parent(s) and agency staff, making a commitment to care for foster or adoptive children?

10. Are you comfortable with working as a team and able to work within the guidelines of the child welfare system (court hearings, transportation to appointments and visits, attending meetings, medications, special education attending medical and therapy appointments, etc.)?

11. Explain your ability to adjust your family's routine and practices to meet the special needs of a child. (ie., willing to give up personal time on weekends, evenings and some holidays to do visits between the foster children and birth parents, willing to participate in therapy with the child if appropriate, sick leave from work, etc.):

12. Are you interested in foster/adopting children from different cultures/races?

Family Life

1. What is your current work schedule(s)?

11. Explain how your family celebrates and what holiday activities your family participates in.
12. What religion(s) are you and your family members?
13. Describe your participation in religious or church activities (How often do you go to church, where do you go to church, what church activities, groups and rituals do you participate in, etc.).
14. What role, if any, does religion play in your daily life?
15. Describe how your spiritual/religious beliefs, values and practices will impact a foster/adoptive child.
16. What would be expected of a foster/adoptive child in regard to their religious beliefs and practices?
17. Describe how you would intend to meet a child's spiritual/religious needs if different from your own (attend different church, transport, etc.).
18. What is your family's expectations/routines regarding personal hygiene and health care (bathroom use, exercise, etc.)?
19. What are your family's preparations for sharing their life with a foster/adoptive child? (home environment changes, bedrooms, schedule changes, activities, sharing parent's time with other children, etc.)
20. Describe your experiences of interacting with people of different races and cultures.

21. How will having a foster/adoptive child of different race/culture affect other people in your home and in your extended family?

22. How will you cope if the foster/adoptive child resents your decision to foster/adopt cross-culturally?

23. Do you and your family feel prepared to foster/adopt a child of a different race or cultural heritage? (If not, what information or assistance do you need before doing so?) Describe ways you can help a foster/adoptive child stay connected to and learn about their racial or cultural heritage (toys, videos, books, games, customs, activities, adult role models, art, museums, plays, concerts, music, meals, skin and hair care).

24. What community resources are available to support and enhance the community's understanding and respect for other races and cultures?

Family Finances

1. Do you feel your income is sufficient to meet the needs of current family members?

2. How will a foster/adoptive placement affect your family financially?

3. How are financial decisions made in your family? Who pays the bills?

4. Are you willing to work with the policies Otter Tail County Human Services has established with regard to money management for foster children (keeping track of receipts for clothing, following the recommended budget, giving allowances, etc.)?

PERMANENCY PLANNING

(Only answer the questions in this section if you are interested in being an adoptive/concurrent foster home.)

1. Describe your understanding of the legal aspects of child welfare, including parental rights, parental roles, and process of concurrent permanency planning in the child welfare system.

2. What are your feelings about the agency's responsibility to make all efforts for reunification?

3. Are you able to support reunification of a child's return to the birth parents or other relatives?
4. Describe your understanding of a foster/adoptive child's experiences of separation, loss, and attachment from their family and home.
5. How would you support a foster/adoptive child discussing memories of birth family, including fantasies the child may have about their birth family?
6. Describe your understanding the importance of preserving a child's connections and family history through visitation and contact, and how this relates to a child's identity and development.
7. What are your feelings about the impact of birth family history and how it relates to the child's sense of identity? (Special traditions for holidays, child's previous lifestyle and norms, cloths, communication, etc.)
8. Explain your understanding of attachment theory and how multiple moves affect a child's sense of trust, stability and behavior?
9. If you were to adopt a child, what is your understanding of the importance of a child's long-term needs and the ability to provide for these needs?
10. Under what circumstances would you ask to have a foster/adoptive child removed from your care?