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**Adult Child Reference Form**

This form needs to be completed by the adult child of her person who is becoming a foster/adoptive parent or the home screener. This form needs to be sent by the person completing it and not the applicant(s). ***Please know that all the following information is kept confidential.*** Feel free to type the form.

Name of Adult Child:       Age:       Regarding:

Email:      Phone:

1. How would you describe your childhood?
2. As a child, have you ever lived away from your parent(s)?  Yes  No

If yes, please explain?

1. If applicable, how would you describe your mother’s parenting?
2. If applicable, how would you describe your father’s parenting?
3. What type of discipline methods were used?

Do you feel they were appropriate and fair?  Yes  No

Please explain:

1. Are your parent(s) religious or spiritual?  Yes  No
2. Do you think your parent(s) could have a child of a different religion in their home?  Yes  No

Please explain further:

1. Have your parent(s) ever had a drinking or drug problem?  Yes  No

If yes, please explain:

1. What characteristics do you think your mother (if applicable) will bring to fostering/adopting?

1. What characteristics do you think your father (if applicable) will bring to fostering/adopting?

1. What do you think will be the most challenging for your mother (if applicable) in fostering/adopting?

1. What do you think will be the most challenging for your father (if applicable) in fostering/adopting?
2. How do you feel about the applicant(s) becoming a foster/adoptive parent?
3. Would you entrust the applicant(s) to supervise your child(ren)?  Yes  No

Please explain your answer:

1. Is there anything else we need to know to help us determine the applicant(s) serving as a foster/adoptive parent?

Who completed this form:       Date: