

FOSTER PARENT APPLICATION

(ALL INFORMATION WILL BE CONSIDERED CONFIDENTIAL TO THE EXTENT PROVIDED BY LAW)

HOW/WHO DID YOU HEAR ABOUT TRY AGAIN HOMES?

IDENTIFYING INFORMATION

APPLICANT 1: _____

Name: First Middle Last D.O.B. Social Security Number

List any other names by which you have been known: _____

If previously married, please list the date and place of marriage(s): _____

Married to: _____ Date of Marriage/Termination: _____

Relationship to Applicant 2 (if applicable): _____

Phone: _____ Work Phone: _____

Email: _____

APPLICANT 2: _____

Name: First Middle Last D.O.B. Social Security Number

List any other names by which you have been known: _____

If previously married, please list the date and place of marriage(s): _____

Married to: _____ Date of Marriage/Termination: _____

Relationship to Applicant 1 (if applicable): _____

Phone: _____ Work Phone: _____

Email: _____

ADDRESS

Current Address: _____

City, State, Zip: _____

County of Residence: _____

Length of time at this address: _____

Do you own or rent your home? _____

If you rent, when does your lease expire? _____ (We will need a copy of your lease agreement)

Please list the total number of rooms in your residence: _____

Please list the total number of bedrooms in your residence: _____

HOUSEHOLD			
LIST EVERYONE (INCLUDING SPOUSE, ROOMMATES, AND CHILDREN WHO RESIDE IN YOUR RESIDENCE)			
NAME: FIRST, LAST, MIDDLE	RELATIONSHIP	GENDER	D.O.B.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHILDREN				
Name	D.O.B.	Social Security Number	Parents of Child	School & Grade

EDUCATIONAL LEVEL
APPLICANT 1: _____ High School (8, 9, 10, 11, 12) College/Tech (13, 14, 15, 16) Graduate School (17+) Name of School where highest level completed: _____
APPLICANT 2: _____ High School (8, 9, 10, 11, 12) College/Tech (13, 14, 15, 16) Graduate School (17+) Name of School where highest level completed: _____

EMPLOYMENT HISTORY- * Please list the last 10 year employment history.

APPLICANT 1: _____

CURRENT:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

PREVIOUS:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

PREVIOUS:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

APPLICANT 2: _____

CURRENT:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

PREVIOUS:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

PREVIOUS:

Name of Employer: _____

Address (Include City, State, Zip): _____

Dates of Employment: _____

Job Title/Brief Description: _____

Supervisor's Name: _____

REFERENCES:

As part of the application and certification process, Try-Again Homes will need to gather references from multiple individuals of personal, work, and/or family relation. Listed below are the types, and numbers of, references we need from you. These individuals will be used as character/professional references for you. Because we will obtain employment references, please note that if you have a co-worker you wish to use as a personal reference, you may do so but this will be considered a personal reference and will not count towards your employment reference. You may wish to contact your references and seek permission to provide their names, and to confirm addresses and telephone numbers. **Please be complete and thorough in providing all the required information such as full and accurate addresses and telephone numbers.**

PERSONAL REFERENCES- (6 total needed; 4 must be unrelated to you)

(1.) Name: _____
 Address: _____
 Telephone Number: _____

(2.) Name: _____
 Address: _____
 Telephone Number: _____

(3.) Name: _____
 Address: _____
 Telephone Number: _____

(4.) Name: _____
 Address: _____
 Telephone Number: _____

(5) Name: _____
 Address: _____
 Telephone Number: _____

(6.) Name: _____
 Address: _____
 Telephone Number: _____

SCHOOL REFERENCES- (If applicable, list all schools the children in your home currently attend)

Student Name: _____
 School Name: _____
 Address: _____
 Telephone Number: _____
 Teacher's Name: _____

Student Name: _____
 School Name: _____
 Address: _____
 Telephone Number: _____
 Teacher's Name: _____

**ADULT CHILD REFERENCES- (If you have children age 18 or older- please complete)
{These children may reside in, or out, of your home}**

Parent of the Child: _____
Child's Name: _____
Address: _____
Telephone Number: _____

Parent of the Child: _____
Child's Name: _____
Address: _____
Telephone Number: _____

Parent of the child: _____
Child's Name: _____
Address: _____
Telephone Number: _____

Parent of the child: _____
Child's Name: _____
Address: _____
Telephone Number: _____

EMPLOYMENT REFERENCES

APPLICANT 1: _____
Current Employer: _____
Address: _____
Telephone Number: _____

Last Employer: _____
Address: _____
Telephone Number: _____

APPLICANT 2: _____
Current Employer: _____
Address: _____
Telephone Number: _____

Last Employer: _____
Address: _____
Telephone Number: _____

CRIMINAL HISTORY – please read information thoroughly before answering

Please know that as part of your certification process, Try-Again Homes will complete a State and Federal background check, child abuse background check, and a driving history check on each applicant applying. It is very important that you disclose to us any involvement you have had with the criminal justice system- whether in relation to major crimes (felonies), minor crimes (misdemeanors), or summary of offenses (Such as moving violations, first offense shoplifting, etc.). We need to be able to trust your willingness to disclose information to us, even if it appears unfavorable. **Please note that failure to disclose any adult charges or convictions may result in a cessation of your application and certification process. Also be aware that reporting your history does not necessarily exclude you from becoming a foster parent, but it must be reported for consideration by Try-Again Homes.** If there are explanations or justifications you wish to offer, please do so. This might include having made a reparation, youthfulness at the time of the offense, community services completed, or rehab/education pertinent to the offense, etc.

APPLICANT 1: _____

Have you ever been arrested? (please circle one) YES NO

Have you ever been charged with a crime? YES NO

If you answered yes to either question, please list details below. Be sure to disclose any criminal history no matter how minor or long ago that it occurred.

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

***If any have been resolved- please provide Try-Again Homes with a copy of the legal disposition from the Court.**

DRIVING VIOLATIONS:

Date: _____ CITATION/VIOLATION: _____

Date: _____ CITATION /VIOLATION: _____

ADDITIONAL COMMENTS:

APPLICANT 2:

Have you ever been arrested? (please circle one) YES NO

Have you ever been charged with a crime? YES NO

If you answered yes to either question, please list details below. Be sure to disclose any criminal history no matter how minor or long ago that it occurred.

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

Date: _____ Arrest/Charge: _____

Is this issue (circle one): PENDING or RESOLVED

***If any have been resolved- please provide Try-Again Homes with a copy of the legal disposition from the Court.**

DRIVING VIOLATIONS:

Date: _____ CITATION/VIOLATION: _____

Date: _____ CITATION /VIOLATION: _____

ADDITIONAL COMMENTS:

FINANCIAL INFORMATION

Are you currently receiving any type of public assistance? _____
 If yes, state the type and amount received: _____ \$ _____

APPLICANT 1: _____
 Current Employer: _____
 Hourly Rate \$ _____ Monthly Income \$ _____ Annual Salary \$ _____
 Other Income Sources: _____
 Amount of Other Income \$ _____
 Do you have Savings/Pensions/Retirement Accounts? (Yes or No) _____

APPLICANT 2: _____
 Current Employer: _____
 Hourly Rate \$ _____ Monthly Income \$ _____ Annual Salary \$ _____
 Other Income Sources: _____
 Amount of Other Income \$ _____
 Do you have Savings/Pensions/Retirement Accounts? (Yes or No) _____

Normal Monthly Expenses for the home (total bills, food...etc.) are: \$ _____/Monthly

*We may request that you contact your credit bureau to obtain a credit check, and provide us with a copy if deemed necessary by Try-Again Homes, Inc.

MONTHLY EXPENSES

RENT/MORTGAGE	\$
AUTO PAYMENT 1	\$
AUTO PAYMENT 2	\$
GASOLINE	\$
INSURANCE (Life, property, health, disability, other)	\$
TOTAL CAR INSURANCE	\$
GAS BILL	\$
ELECTRIC BILL	\$
WATER BILL/GARBAGE/SEWAGE BILL	\$
HOME PHONE BILL	\$
CELL PHONE BILL	\$
CABLE BILL/ INTERNET BILL	\$
DAY CARE EXPENSES	\$
ALIMONY/CHILD SUPPORT	\$
GROCERIES	\$
SCHOOL LUNCHES	\$
DINING OUT	\$
ENTERTAINMENT	\$
CLOTHING	\$
CHURCH TITHE	\$
MEDICAL NEEDS	\$
LOAN OR CREDIT CARD 1	\$
LOAN OR CREDIT CARD 2	\$
LOAN OR CREDIT CARD 3	\$
OTHER EXPENSES	\$
TOTAL MONTHLY EXPENSES	\$

SIGNATURES

In signing below, I (we) verify that the information completed, and contained, in this application is TRUE AND CORRECT.

APPLICANT 1 SIGNATURE

DATE

APPLICANT 2 SIGNATURE

DATE

AGENCY USE ONLY

DATE SENT: _____ DATE RECEIVED: _____

COMMENTS:

HOMEFINDER SIGNATURE

DATE

SUPERVISOR SIGNATURE

DATE

TRY-AGAIN HOMES

AUTHORIZATION FOR THE RELEASE OF CONFIDENTIAL INFORMATION

I, the undersigned, do hereby attest that I have never been convicted of any offense related to the abuse of children or of violent or assaultive behavior.

I understand it will be necessary for Try-Again Homes to investigate my character references. I hereby give my consent for this information exchange and authorize such agencies to release any information requested by Try-Again Homes. I understand that the agencies to be contacted will be employers, courts (juvenile and adult), local/state law enforcement or district magistrates, social services, and any other persons or agencies with whom I have had contact with.

***Failure to report charges/convictions will result in immediate rejection/closure of your home by this agency. ***

Dated this _____ day of _____, 20_____.

(Applicant Signature)

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT THE ABOVE INFORMATION

Try-Again Homes
1800 Locust Avenue
Fairmont, WV 26554

TRY-AGAIN HOMES

AUTHORIZATION FOR THE RELEASE OF CONFIDENTIAL INFORMATION

I, the undersigned, do hereby attest that I have never been convicted of any offense related to the abuse of children or of violent or assaultive behavior.

I understand it will be necessary for Try-Again Homes to investigate my character references. I hereby give my consent for this information exchange and authorize such agencies to release any information requested by Try-Again Homes. I understand that the agencies to be contacted will be employers, courts (juvenile and adult), local/state law enforcement or district magistrates, social services, and any other persons or agencies with whom I have had contact with.

***Failure to report charges/convictions will result in immediate rejection/closure of your home by this agency. ***

Dated this _____ day of _____, 20_____.

(Applicant Signature)

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT THE ABOVE INFORMATION

Try-Again Homes
1800 Locust Avenue
Fairmont, WV 26554