



PROFILE FOR SINGLES

Name _____ Date _____

If you are a single parent:

1. How long have you been a single parent? _____

2. How did you become a single parent? _____

3. To whom do you go to for help when you are feeling lonely or worried? _____

4. How will becoming a foster parent affect your dating patterns and intimate relationships?

5. If you wanted to get married, what impact would being a foster parent have on your marriage plans?

6. Briefly describe each member of your household – their ages, personalities, interests, what they think about your plans to become a foster family. _____



7. What role will your expended family play in the life of your foster children _____

8. How do members of your present family express the following feelings?

Happiness: _____

Love/Affection: _____

Anger: _____

Disappointment: _____

Frustration: _____

Sadness/Depression: _____

9. Who are the people you will talk with when you feel these emotions? _____

10. How does these people feel about your becoming a foster parent?



11. How do you deal with stress? _____

12. How are the chores in your family divided? _____

What happens when someone doesn't want to do his/her chores? _____

13. What plans have you made for the care of your children in the event of your death, serious illness, or injury? _____

Are these plans specified in a written or verbal agreement? _____

14. How will becoming a foster affect:

A. Your free time? _____

B. The Condition of your home? _____

C. The amount of money that you have? _____

D. Your relationship with members of your extended family (your parents, brothers and sisters, cousins, etc.)? _____



E. Your Lifestyle? _____

15. What will you like most about being a foster Parent? _____

16. What parts of foster care might cause you the most difficulties? _____

17. If you were in a crisis of some kind (financial, emotional, medical, etc.), to whom would you turn for help?

How do these people feel about your becoming a foster parent? _____

18. If a foster child's (or his parents') religious preference were different from yours, would you accept the child? YES NO

Would you take the child to a church of his own denomination, or arrange for the child care while you attend church? YES NO Explain.

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19. How would you describe your home and neighborhood to the child who might be placed with you (or to the child's parents)?

20. Do you have pets? If so, please give each pet's name, and indicate what kind of animal it is and how long you have had it. (NOTE: The Grandberry Intervention Foundation requires foster families to document that each pet has received the appropriate vaccinations within the last year.)

If a child placed with you were afraid of your pet or became allergic to it, what would you do?

21. Every family has rules. In your home:

A. What rules would you be most willing to bend

B. What rules would be most serious of they were broken?



22. How will privacy and nudity be handled in your home? _____

23. Describe your relationship with your neighbors. _____

How do your neighbors feel about your becoming a foster parent or adoptive parent?

24. Who regularly visits your home? _____

Whose homes do you visit regularly? _____

How do these people feel about your becoming a foster parent? _____

25. How long have you lived in your residence?

26. When necessary, can you leave work to take a child to counselling sessions, doctor's visits, school meetings, parental visitations (if appropriate), and so forth Yes No

27. What activities do you enjoy?

Applicant's Signature

Date