

AUTOBIOGRAPY

This packet can help us begin to know you as an individual and as a member of your family. Please be open and honest in your answers to each question. Please be thorough in answering each question as well. Once this packet is received and reviewed, your foster care/adoption coordinator will be contacting you to schedule a time for her to review this packet with you. If you have any questions, please contact your foster care/adoption coordinator.

Complete Name: _____

Birth Date: _____

Social Security Number: _____

Place of Birth: _____

Parents Names: _____

Brothers Names: _____

Sisters Names: _____

Half-Brothers and Sisters Names: _____

Step Brothers and Sisters Names: _____

Extended family members that may have or do live with you: _____

Education

Please include dates of attendance, city and state of school, and the degrees or specialized education you received. Begin with elementary school and end with the highest education you have received.

Elementary School(s):

Middle School(s):

High School(s):

College(s):

Employment

Please begin with your current employer. Fill in all requested information, and complete the same for all employers for the last ten years. If you are a stay-at-home parent, please include that here.

Current: (Check here if not currently employed ____)

Employer _____
Address _____
Telephone _____
Position _____

Historical:

Employer _____
Address _____
Telephone _____
Position _____

Dates of Employment _____

Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____

Dates of Employment _____

Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____

Dates of Employment _____

Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____
Dates of Employment _____
Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____
Dates of Employment _____
Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____
Dates of Employment _____
Reason for Leaving _____

Employer _____
Address _____
Telephone _____
Position _____
Dates of Employment _____
Reason for Leaving _____

How do you feel about your current job?

Residential History for the Past Ten Years

Current address: _____

Date moved to this address: _____

Describe the neighborhood where you currently live:

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous address: _____

Date moved to this address: _____

Previous Marriages

How many previous marriages have you had? _____

Check here if you have never been married ____. Then, proceed to section regarding children.

First Marriage:

Married to: _____

Date relationship began: _____

Date of separation: _____

Date relationship ended: _____

Marriage ended in: ___ Separation ___ Dissolution
 ___ Divorce ___ Death

Second Marriage:

Married to: _____

Date relationship began: _____

Date of separation: _____

Date relationship ended: _____

Marriage ended in: ___ Separation ___ Dissolution
 ___ Divorce ___ Death

Third Marriage:

Married to: _____

Date relationship began: _____

Date of separation: _____

Date relationship ended: _____

Marriage ended in: ___ Separation ___ Dissolution
 ___ Divorce ___ Death

Fourth Marriage:

Married to: _____

Date relationship began: _____

Date of separation: _____

Date relationship ended: _____

Marriage ended in: ___ Separation ___ Dissolution
 ___ Divorce ___ Death

Children

Complete this section regarding any children that you have. Check here if you have no children____.

Name: _____ Gender: ____

Birth Date: _____ Social Security: ____-____-____

Where and with whom they live: _____

Personality and Physical Description:

Educational situation (academically, behaviorally, and socially):_____

Child's feelings regarding foster care/adoption: _____

Name: _____ Gender: ____

Birth Date: _____ Social Security: ____-____-____

Where and with whom they live: _____

Personality and Physical Description: _____

Educational situation (academically, behaviorally, and socially):_____

Child's feelings regarding foster care/adoption: _____

Name: _____ Gender: ____

Birth Date: _____ Social Security: ____ - ____ - ____

Where and with whom they live: _____

Personality and Physical Description:

Educational situation (academically, behaviorally, and socially): _____

Child's feelings regarding foster care/adoption: _____

Name: _____ Gender: ____

Birth Date: _____ Social Security: ____ - ____ - ____

Where and with whom they live: _____

Personality and Physical Description: _____

Educational situation (academically, behaviorally, and socially): _____

Child's feelings regarding foster care/adoption: _____
