



FAMILY &
CHILDREN'S SERVICES
OF THE WATERLOO REGION

Family and Children's Services of the Waterloo Region Foster, Adopt, or Kin Application Form

Full Name(s): _____

Home Address: _____

City _____ Postal Code _____

Home Phone # _____ Cell Phone # _____

Work Phone # _____

E/mail Address: _____

Thank you for your interest in caring for a child. We look forward to receiving your application.

*"The feeling that you've made a difference in the life of a child
who just needed someone to be there for them, is incredible."*

- Donna, Foster Parent

HEAD OFFICE
200 Ardelt Ave., Kitchener, ON N2C 2L9
t: 519-576-0540 | f: 519-576-4709
toll free: 1-844-772-1515

BRANCH OFFICE
168 Hespeler Rd., Cambridge, ON N1R 6V7
t: 519-623-6538 | f: 519-576-4709

FAMILY CENTRE
65 Hanson Ave., Kitchener, ON N2C 2H6
t: 519-772-4399 | f: 519-576-4709

*Family & Children's Services of the Waterloo Region
is incorporated as the Children's Aid Society of the
Regional Municipality of Waterloo.*

ABOUT YOU

	Applicant 1		Applicant 2
Full Legal Name (last, first, middle)			
Maiden Name (if applicable)			
Previous Names			
Nickname or Alias			
Date of Birth Place of Birth			
Gender			
Religion			
Education			
Language(s)			
Occupation			
Employer			
Racial Origin			
Ethnic Origin			
Native Band Name/#			
Status: Yes or No			
Canadian Citizenship: Date or N/A if born in Canada			
Landed Immigrant Status: Date			
Spousal Relationship Information (if applicable)			
Date & Place of Marriage/Domestic Partnership(s)			
Marriage Certificate #			
Children of Applicant(s)			
Name (surname, given)	Date of Birth (dd/mm/yy)	Gender M/F	Where living (home, school)
Others Living at your Home			
Name (surname, given)	Birth Date (dd/mm/yy)	Age	Relationship to Applicant (relative, boarder, etc)

REFERRAL SOURCE

Please let us know how you heard about the fostering or adoption programs at our agency?
(i.e. other foster parent, advertisement, website, etc.)

MOTIVATION & INTERESTS IN FOSTERING AND/OR ADOPTION

What are the reasons you want to be a foster or adoptive parent? What led you to make this decision now?

OTHER PREVIOUS FOSTERING OR ADOPTION APPLICATIONS

Have you ever previously tried to foster or adopt children, either as an individual, a couple, or in a previous relationship? Please provide details.

EXPERIENCES

Childhood experiences in foster care, or as an adopted child may affect your approach to parenting. Has anyone in your household ever been in foster care, or were they adopted as a child? Please provide some information about who this was and about the experiences.

Frequently, applicants may know of people with experience in foster care or adoption. Do you have any relatives or close friends who have either been in foster care, were adopted, adopted a child themselves, or fostered a child? Please tell us how their experiences have affected you.

Have you ever been involved with Children’s Aid Society? If yes, please provide details.

Have the police ever attended your home for any reason? Please explain.

Has anyone in your home been arrested or charged? Please explain.

Please describe all significant events, stresses and losses for you and/or your family in the past 2 years.

What other things take up a lot of your family's time and attention?

CARE OPTIONS

Please indicate the type of care you would like to pursue at this time.

- () **Foster Home**
Children are placed in these homes for periods ranging from several weeks for up to a year or more. Within that time, the plan for the child could change, requiring a longer term or permanent placement.

- () **C.A.R.E. Home**
CARE (Creating Alternative Residential Experiences) foster parents live in agency homes and foster 4 to 5 children and youth with special needs. A child and youth worker in-home support and clinical staff support is built into the program.

- () **Adoptive Home**
Children placed in these homes are legally available for adoption. This agency also offers the Foster-to-Adopt program and Infant Consent program. You will learn more about these programs from your recruitment worker.

- () **Kinship Care**
When a child needs to come into the care of Family & Children's Services, it is first determined whether a suitable Kin placement can be located. Kin is defined as a relative or community member who has a significant relationship with the child.

Age Range of the Child(ren): _____

Gender of the Child: _____

Are you open to caring for siblings? _____

What is your experience with special needs children? Examples include physical limitations, learning disabilities, medical needs, mental and emotional difficulties.

What is your experience with people who are of a different race, religion or culture than your family?
How easily could your family accommodate such differences?

FOR EACH APPLICANT TO CERTIFY

I/We, the undersigned, submit this application with the following acknowledgement:

1. I/We understand and agree that information concerning one of us individually, may be shared by the Society with my co-applicant.
2. I/We do certify that the information given in this application is, to the best of my/our knowledge, true and complete. I/We understand that by submitting this application, we agree to Family and Children's Services of the Waterloo Region conducting an internal record check of our family.

Signature of Applicant #1

Date

Signature of Applicant #2

Date

Thank you for applying to foster, adopt, or provide kinship care! Once we receive your application, a recruitment team member will call you to set up a time to meet with you. If you have any questions, please give us a call at 519 576 0540 (ask for a foster/adoption recruitment worker).