

Licensing Home Study – Part IV
(For minor children living in the home)

Foster Home Name: _____

Child Name: _____
 First **Middle** **Last**

Date of Birth: _____ **Race/Ethnicity:** _____

QUESTIONS FOR PARENT(S)

1. Describe your child's personality?

2. What things is the child interested in?

3. What activities does the child like to do?

4. Does the child have any special needs?

5. What is your child's strength?

6. What is your child's weakness?

QUESTIONS FOR THE CHILD

7. What grade are you in and what school do you go to?

8. What are your favorite and least favorite classes?

9. What kind of chores do you do around the house?

10. What do you like to do for fun?

11. What is your family like?

12. How do you get along with everyone in your family? (parents, brothers, sisters)

13. What kinds of things does your family do?

14. What do you think a foster child is?

15. What do you think about a foster child living in your house?

16. Is there anything you would like to do with a foster child?

17. What are some good things about having a foster child in your home?

18. What are some bad things about having a foster child in your home?

19. What happens when you get in trouble in your house? By who?

Applicant's Signature and Date

Applicant's Signature and Date

Child's Signature and Date

Licensing Specialist Signature and Date