

LET ME TELL YOU ABOUT MY CHILD

Please share information about your child that would be helpful to the foster or relative caregiver caring for them.

Child's name _____ **Prefers to be called:** _____

Age _____ **Birthday** _____

What should we know about your child's sleeping habits? (for example: bedtime, wakes up during the night, naps, needs a nightlight, has nightmares, sleeps soundly, hard time waking up, etc.)

What should we know about your child's bathing, grooming, dressing and bathroom routine? (for example: uses diapers or training pants, needs help with bathing, can care for him/herself, has special skin needs or allergies, dresses without help, bed wetting, special hair/skin care etc.)

What should we know about your child's eating habits? (for example: eats balanced meals, special diet, infant formula, skips meals, fussy eater, does not like certain foods or allergies, foods likes/dislikes etc.)

What should we know about your child's health? (for example: doctor, dentist, immunization history, history of illnesses, allergies, asthma, takes medicine, vision or hearing problems, hospitalizations, any upcoming appointment, attends therapy or counseling etc.)

What should we know about your child's education? (for example: school, grade, favorite subject, reports/projects due, special school needs, takes medication, do they receive medication at school, needs help with homework, attendance/behavior/performance, early intervention services, special education, vocational or education goals etc.)

Does your child help with work around the house? (for example: does dishes, helps with younger children, can shop for groceries, gets an allowance, specific chores they enjoy etc.)

What does your child do for fun? (for example: likes playing with others, has a favorite game or sport, likes reading or drawing, likes playing alone, special interests, favorite TV show, are they a part of any organized activities, involvement with a mentor (i.e. girl scouts, sports, church groups etc.)

What should we know about your family's culture and religious traditions? (for example: member of religious community, attends religious services regularly, requires special diets, celebrates religious/culture holidays, observes religious practices, family traditions etc.)

Who are the people important to your child? (for example: siblings, grandparents, aunts, uncles, neighbors, friends, classmates, teachers, coaches, church members etc.)

What is special about your child? (their strengths or special interests/talents, fears, comfort items – like teddy bears, blankets, etc.)

What else should a caregiver know to care for your child?

For older children, tell us any particular challenges with caring for your child? (for example: very active, runs away, sexual behavior, experimenting with alcohol or drugs, parenting, delinquency history, curfew, work history, etc.)

Parent's Name: _____ **Date Completed:** _____

Caseworker's Name: _____ **Date Completed:** _____