State of Illinois Department of Children and Family Services

STATEMENT OF RELATIONSHIP

I,, am related to the following children (print name of relative)		
escribed below.	(print names of children)	
escribed below.		
I am related to the children's mothe		
I am related to the children's father	•	
	her were married to each other wher were not married to each other	
e the words which best describe your re	elationship to the children being p	laced in your home. Circle all that ap
Grandfather	Uncle	Adult Brother
Grandmother	Aunt	Adult Sister
Great-grandfather	Great-uncle	Adult Step-brother
Great-grandmother	Great-aunt	Adult Step-sister
Step-father	Nephew	First cousin
Step-mother	Niece	Second Cousin
Step-grandfather	Step-grandmother	
☐ Spouse of one of the above	Partner of one of the above by civil union	
Godfather of the child	Godmother of the child	i
☐ I am a close family friend or have	ve a trusted relationship with	
RESOURCE INFORMATION		
I want to be a resource for the children	ren for: Placement V	Visitation Other Contact
Check if children are being place	ed with this relative. Names of	children placed:
Signature of Relative	Signature o	f Relative
Signature of Witness		

The worker may ask you to draw a family tree on the back of this statement of relationship which shows all marriages and births necessary to prove the relationships described above. Give complete names and approximate birth and marriage dates to the best of your ability.