

Application for Foster Care

Sherwood & Myrtie Foster Home for Children
PO Box 978
Stephenville, TX 76401
254-968-2143

Family Last Name: _____ Phone: _____

Address: _____
(Physical Address) (Mailing Address) (City) (State) (Zipcode)

Husband: _____
(First Name) (Middle Name) (Last Name) (Soc.Sec. #) (Birthday)

(List all cities in Texas that you have lived since you were 14 years old.)

Wife: _____
(First Name) (Middle Name) (Maiden Name) (Last Name) (Soc.Sec. #) (Birthday)

(List all cities in Texas that you have lived since you were 14 years old.)

Race: _____ (Necessary for required Criminal History Check)

Children: _____
(First Name) (Last Name) (Soc.Sec. #) (Birthday)

(First Name) (Last Name) (Soc.Sec. #) (Birthday)

(First Name) (Last Name) (Soc.Sec. #) (Birthday)

1. Is husband member of Church of Christ? __Yes __No Specify Other _____

2. Is wife member of Church of Christ? __Yes __No Specify Other _____

3. Where does family attend church? _____

4. Do you have any major health problems? __Yes __No Explain _____

5. Type of Child Requested: __Male __Female Age Range _____

Number you would consider ___ Nationalities you would not accept _____

6. Occupation and where: Husband _____ Wife _____

Salary Ranges: _____

7. Do you own your own home? _____ Do you own your car? _____

8. Do you use alcohol or drugs? Yes No Explain _____

9. Have you (your spouse) ever been convicted of a felony or misdemeanor? Yes No

If so, explain _____

10. Physical Description:

Husband: Eyes _____ Hair _____ Height _____ Weight _____

Wife: Eyes _____ Hair _____ Height _____ Weight _____

11. Have you ever worked with any other childcare agency? _____ Where and when? _____

12. Why do you want to be foster parents? _____

13. References: List persons who are acquainted with your family life, if possible.

Minister _____
(Name) (Complete Address) (Phone Number)

Elder _____
(Name) (Complete Address) (Phone Number)

Employer _____
(Name) (Complete Address) (Phone Number)

Friend _____
(Name) (Complete Address) (Phone Number)

Neighbor _____
(Name) (Complete Address) (Phone Number)

(Date) (Husband Signature) (Wife Signature)

Please attach a recent photo of your family and home, if possible.

Return to Foster's Home for Children, PO Box 978, Stephenville, TX 76401.

Thank You