

State of Illinois  
Department of Children and Family Services

**STATEMENT OF RELATIONSHIP**

I, \_\_\_\_\_, am related to the following children  
(print name of relative)

\_\_\_\_\_  
(print names of children)

as described below.

- I am related to the children's mother.
- I am related to the children's father.
  
- The children's father and mother were married to each other when the children were born.
- The children's father and mother were not married to each other when the children were born.

Circle the words which best describe your relationship to the children being placed in your home. Circle all that apply.

- |                   |                  |                    |
|-------------------|------------------|--------------------|
| 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 am a close family friend or have a trusted relationship with \_\_\_\_\_

**RESOURCE INFORMATION**

I want to be a resource for the children for:  Placement       Visitation       Other Contact

Check if children are being placed with this relative. Names of children placed:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Relative

\_\_\_\_\_  
Signature of Relative

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

*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.*