

## 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:** \_\_\_\_\_