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## RESOURCE PARENT QUESTIONNAIRE

**NAME:** \_\_\_\_\_

### SECTION I

#### PHYSICAL DESCRIPTION & PERSONALITY

**Ethnicity** \_\_\_\_\_

**Height** \_\_\_\_\_

**Weight** \_\_\_\_\_

**Hair color** \_\_\_\_\_

**Eye color** \_\_\_\_\_

**GIVE TWO ADJECTIVES TO DESCRIBE YOURSELF** \_\_\_\_\_

\_\_\_\_\_

**GIVE TWO ADJECTIVES OF HOW OTHERS MAY DESCRIBE YOU** \_\_\_\_\_

\_\_\_\_\_

#### HOBBIES

**Do you have hobbies?** \_\_\_\_\_

**Do you go on vacations?** \_\_\_\_\_

**What do you enjoy doing?** \_\_\_\_\_

**DO YOU HAVE SIBLINGS? If so, please list by birth order, including current names and ages of each sibling, marital status, occupation, and where they live.**

Name	Age	Marital Status	Occupation	City, State

**INFORMATION ON YOUR PARENT 1 (birth mother/father)**

Name \_\_\_\_\_

Place and date of birth \_\_\_\_\_

Occupation \_\_\_\_\_

Relationship growing up \_\_\_\_\_

Current relationship \_\_\_\_\_

Use three adjectives to describe this parent (include positive and negative)

\_\_\_\_\_

Is your parent retired? \_\_\_\_\_

Is your parent deceased? (If yes, include year) \_\_\_\_\_

**INFORMATION ON YOUR PARENT 2 (birth mother/father)**

Name \_\_\_\_\_

Place and date of birth \_\_\_\_\_

Occupation \_\_\_\_\_

Relationship growing up \_\_\_\_\_

Current relationship \_\_\_\_\_

Use three adjectives to describe father (include positive and negative)

\_\_\_\_\_

Is your parent retired? \_\_\_\_\_

Is your parent deceased? (If yes, include year) \_\_\_\_\_

**INFORMATION ON ADDITIONAL PARENT(S) (adopted/step) or other Primary caregiver, as applicable**

**Name** \_\_\_\_\_

**Place and date of birth** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Relationship growing up** \_\_\_\_\_

**Current relationship** \_\_\_\_\_

**Use three adjectives to describe father (include positive and negative)**

\_\_\_\_\_

**Is your parent retired?** \_\_\_\_\_

**Is your parent deceased? (If yes, include year)** \_\_\_\_\_

**RELATIONSHIP TO FAMILY**

**Relationship with parents** \_\_\_\_\_

\_\_\_\_\_

**Relationship with siblings** \_\_\_\_\_

\_\_\_\_\_

**How does your family feel about your plans to foster/adopt?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What happy memories do you have of your childhood?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Do you have unhappy memories of your childhood?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**How did you feel about school? (Grades, favorite subjects, friends)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Highest Level of Education (identify schools by name and year graduated)**

**Junior High** \_\_\_\_\_

**High school** \_\_\_\_\_

**Associates Degree or Trade School** \_\_\_\_\_

**Bachelor's Degree** \_\_\_\_\_

**Master's Degree** \_\_\_\_\_

**Doctoral Degree** \_\_\_\_\_

**CHRONOLOGICAL TIMELINE OF LIFE FROM BIRTH TO PRESENT**

**Where have you lived? (Include years)**

<b>City, State</b>	<b>Years</b>

**Where have you worked? (Include years and titles)**

<b>Place Worked</b>	<b>Title</b>	<b>Years</b>

**Have you served in the military? (If yes, identify branch of service, position held and years of service)**

\_\_\_\_\_

\_\_\_\_\_

**How were you parented? (What was style of Mom?/Dad?)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Who disciplined you as a child? How? (For example withholding of privileges, spanked, reprimanded, open communication)**

\_\_\_\_\_

\_\_\_\_\_

**Do you or would you parent in the same way or differently than your parents?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PREVIOUS MARRIAGES** YES \_\_\_\_\_ NO \_\_\_\_\_

(If yes, name of previous spouse, date of marriage, date of divorce, reason for divorce)

Previous Spouse	Date of Marriage	Date of Divorce	Reason for Divorce

**VIOLATIONS**

Have you ever been convicted or arrested for a felony or misdemeanor? \_\_\_\_\_

Have you ever been reported for child abuse or neglect? \_\_\_\_\_

If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION II (if applicable)**

**CURRENT RELATIONSHIP (Marriage or partnership)**

Year and location of where you met your spouse/partner \_\_\_\_\_

\_\_\_\_\_

How did you meet? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What attracted you to your spouse/partner? \_\_\_\_\_

Has the thing that attracted you or interested you in your spouse/partner changed in any way since you got married or established your committed relationship?

\_\_\_\_\_

\_\_\_\_\_

Year married and location of marriage (include city and state) \_\_\_\_\_

Year you began living in the same home \_\_\_\_\_

Use two adjectives to describe your spouse/partner \_\_\_\_\_

\_\_\_\_\_

What are your spouse's/partner's strengths and weaknesses? \_\_\_\_\_

\_\_\_\_\_

All couples have differences, what do you argue about? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**How do you resolve differences?** \_\_\_\_\_

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**What are the strong points in your marriage/relationship?** \_\_\_\_\_

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**Have you ever been separated from your current spouse/partner?** \_\_\_\_\_

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**What is the plan for a child in your home in the event you become incapacitated or your relationship is dissolved?**

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**Has any member of your family been involved in treatment or counseling related to alcoholism, drug abuse, mental illness, financial problems, school problems, marital/relationship problems?**

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### **SECTION III**

#### **PARENTING SKILLS AND FAMILY LIFE**

**Do you have children?      YES \_\_\_\_\_      NO \_\_\_\_\_**

*If yes, describe each child's personality, how he or she performs in school and what extra-curricular activities each is involved in.*

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**Do any of your children live somewhere other than in your residence? If yes, where and how often do you have contact with them?**

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**What parenting style is most apparent in your home? (Positive, punitive, control, freedom)**

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**How do you parent? Or, if you are not currently a parent, how do you envision parenting?**

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**Do you have previous experience working with children? \_\_\_\_\_**

**Have you ever cared for foster children or adopted a child? \_\_\_\_\_**

**What motivated you to apply to become a foster/adoptive parent? \_\_\_\_\_**

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**Have you ever experienced fertility issues? \_\_\_\_\_**

**What is your family's attitude about attending required ongoing training? \_\_\_\_\_**

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#### **CHILD CARE**

**\*Remember 24 hours a day, 7 days a week supervision is required for all placements regardless of the age.**

**Who will provide care for the foster/adoptive child or children? (Detailed explanation, include before and after school care if applicable, emergency care if child is ill)**

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#### **SECTION IV**

##### **RELIGION**

**What is your religious affiliation? \_\_\_\_\_**

**Do you attend services? \_\_\_\_\_**

**What role (if applicable) does a spiritual being play in your life? \_\_\_\_\_**

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## SECTION V

### HOME ENVIRONMENT

Do you have pets? Yes or No

If yes, what breed(s) \_\_\_\_\_

What type of neighborhood do you live in? \_\_\_\_\_

How far are the nearest community resources such as libraries, shopping, fire station, etc.?

What hospital services your community? \_\_\_\_\_

Describe your home (number of bedrooms, baths, levels, basement) \_\_\_\_\_

What are your zoned schools?

Elementary School	Middle School	High School

## SECTION VI

### INCOME AND FINANCIAL RESOURCES

Please describe any financial hardships or stressors that you are currently experiencing.

## SECTION VII

### MEDICAL INFORMATION

Was there any experience of physical, sexual, emotional or substance abuse in your family of origin?

If so, how did this affect you? \_\_\_\_\_

Are you affected by any medical condition that we should be aware of? \_\_\_\_\_