



Extraordinary Families

APPLICATION FOR RESOURCE FAMILY HOME STUDY PART II

This attachment is to be completed by each individual applicant as a supplement to the Resource Family Application.

I. IDENTIFYING/DEMOGRAPHIC INFORMATION

- A. Your Preferred/Chosen Name: _____
- B. Pronouns (*example: she, her, & hers*): _____
- C. Gender Identity/Expression: _____
- D. Sexual Orientation: _____

II. FAMILY BACKGROUND

A. Parents: Please provide **YOUR** parent(s) information, as applicable:

PARENT 1		PARENT 2	
Name:	_____	Name:	_____
Address:	_____ _____ _____	Address (if different from Parent 1):	_____ _____ _____
Age:	_____	Age:	_____
Gender:	_____	Gender:	_____
Health Status:	_____	Health Status:	_____
Date & Cause of Death (if applicable):	_____	Date & Cause of Death (if applicable):	_____
Additional Information:	_____	Additional Information:	_____

B. Siblings: Please list in order of age. Use a separate page if more than five.

Name	City/State	Age	Gender	Occupation	Partner Status
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

III. MARITAL/DOMESTIC PARTNERSHIP HISTORY

- A. Name of former spouse/partner: _____
- B. Date of former marriage or domestic partnership _____ Place: _____
- C. Date marriage or domestic partnership terminated: _____ Place: _____

IV. EDUCATIONAL BACKGROUND (High school and higher education, if applicable):

Name of School	Field of Study	Degree	Graduation Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

V. EMPLOYMENT HISTORY (Past 10 years – please attach additional sheets, if needed):

Company Name	Job Title	Dates of Employment
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever been fired or laid off from a place of employment: Yes No

VI. MILITARY SERVICE

- Branch of Service: _____ Type of Discharge: _____
- Period of Service: _____ Present Status: _____

VII. CRIMINAL HISTORY

- A. Have you ever been arrested/detained for an offense other than a minor traffic violation?
 Yes No
- B. If yes, please provide a brief narrative (you may attach additional pages, if needed):

VIII. COMMUNITY INTEREST AND HOBBIES (Organizations in which you are active, hobbies that you like, etc.)

IX. MISCELLANEOUS INFORMATION (Other information for us to know you better)

- A. Citizenship/Country: _____
- B. Number of Years in California: _____
- C. Place of Birth (City/State): _____
- D. Languages You Speak: _____
- E. Native American Tribal Affiliation: _____

X. CURRENT FAMILY FUNCTIONING

- A. What does your family do for recreation?

- B. What religion/spirituality (if any) do you identify as? _____
- C. What religious/spiritual rituals do you follow? _____

- D. What holidays do you celebrate with regularity?

- E. What are your eating habits (time, special foods, who eats together, etc.)?

F. What does your average day look like?

XI. SIGNATURE

I understand that this is part of an application that is preliminary to a home study. Its purpose is to determine whether a home study will be processed.

I hereby certify, under penalty of perjury under the laws of the State of California, that the above information is true and correct.

Signature: _____ **Date:** _____