



HOME SAFETY CHECK

Family Name:	
Date of Approval:	
Home Safety Check Completed By:	

Primary Contact

Family Name:	
Street Address:	
City:	
State:	
Zip:	
Phone:	

Legal Names:

Father's Legal Name:	
Date of Birth:	
Place of Birth:	

Mother's Legal Name:	
Date of Birth:	
Place of Birth:	

Children / Other Adults in the Home:

Name	Relationship	Any pertinent health info.



Family Name:	
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Motivation and Understanding of Hosting and Adoption:

Description of Family Home:

Community Description:



Family Name:	
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Planned activities during hosting

Recommendation:

Yes or No: This appears to be a safe and suitable family. I have no reservations about their ability or desire to host up to ____ children.

Signature of Approval: _____ **Date:** _____