

Benton County  
FOSTER/ADOPTIVE PARENT SOCIAL HISTORY-PART 1  
(To be completed by individual applicants separately)

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

The purpose of this form is to better understand you and what you have to offer our clients. The information you supply will also help to evaluate your home and family in terms of the licensing standards established by the Minnesota Department of Human Services. ANSWER EACH QUESTION COMPLETELY. If more space is needed, attach additional paper.

PERSONAL HISTORY:

1. Name: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Birthplace: \_\_\_\_\_
4. Parent's names and current addresses (If deceased, note date of death)

	Mother	Father
Name:		
Address:		
Age:		
Marital Status:		
Occupation:		

5. Current frequency of contact with each parent, if applicable.

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

6. Describe your current relationship with your parents, including a description of their personality traits.

7. Describe your childhood. Include where you lived, any moves, parental involvement, general atmosphere of the home you grew up in and relationships with any other significant adults in your life, such as aunts/uncles, grandparents, etc.

8. What kinds of family celebrations or traditions did your family observe?

9. How did your parents encourage you?

10. What form(s) of discipline were used on you as a child?

11. What forms were most effective?

12. What forms were least effective?

13. Were you ever abused verbally, physically, emotionally, or sexually as a child? If yes, please describe briefly.

14. Were you exposed to alcohol or drug use or abuse in your childhood home? If yes, explain.

15. How did you become independent from your family?

16. Your siblings-oldest to youngest, including yourself:

Full Name	Age	Address (City/State)	Marital Status	# of Children	Occupation	Personality Traits

Please note with a \* which siblings you are currently closest to.

17. Describe yourself (personality, your likes/dislikes). What do you enjoy doing in your personal leisure time (hobbies, interests, activities, etc.)?

18. What is important to you?

19. What do you consider to be significant events in your life thus far? How have you dealt with these events? How have these events affected you?

**EDUCATION:**

1. What is the highest grade or year completed in school?

2. Do you have a high school diploma or GED?

If yes, where and what year did you receive your diploma or GED?

3. What was school like for you? What were your challenges and successes in school?

4. List post-secondary schools attended, certificates or degrees received and dates.

5. Do you have any educational goals for the future?

**WORK EXPERIENCE:**

1. List job titles, starting with your first job after high school through the present.

EMPLOYER:	JOB TITLE:	Work w/ children or vulnerable adults?

2. What is your current work schedule?
3. Do you anticipate any changes in your employment/career in the next five years?
4. What are your employment or career goals for the future?

**HEALTH INFORMATION:**

1. Do either you or your current partner/spouse have health problems or other limitations?  
If yes, explain.

2. What prescription medications do you and your partner use?

3. Have you or your partner ever been hospitalized?

If yes, please explain. (Include the year and reason)

4. Has anyone in your household had a mental health diagnosis?

If yes, explain.

5. Does anyone in your household use tobacco products?

If yes, who, for how long, and current use.

#### **RELATIONSHIPS:**

1. List previous significant relationships, including marriages and other long-term relationships. Include name of partner and length of relationship.

2. If currently married, date of marriage:

#### **If you are currently in a relationship:**

1. Describe your partner, including her/his strengths and weaknesses.

2. How long have you been in your current relationship? What makes your current relationship different (stronger/weaker) from other relationships?
  
  
  
  
  
3. What is your *communication style* with your partner?
  
  
  
  
  
4. Are you facing any challenges in your current relationship?
  
  
  
  
  
5. Have you ever been separated or considered ending your current relationship? If yes, explain.
  
  
  
  
  
6. Has there been any abuse or infidelity in your relationship?
  
  
  
  
  
7. How long can you go without talking when you and your partner have a disagreement?
  
  
  
  
  
8. What are your relationship goals for the future?
  
  
  
  
  
9. How do you think having foster children would impact your relationship with your partner? With your children (if any)?

**PERSONAL CHARACTERISTICS:**

1. How have you handled challenging events and situations in your life? What is your best way to deal with stress?
  
  
  
  
  
  
  
  
2. When your plans change unexpectedly, how do you manage that? How stressful is it to change?
  
  
  
  
  
  
  
  
3. How do you express feelings of anger, frustration, and conflict?
  
  
  
  
  
  
  
  
4. How do you resolve conflict?
  
  
  
  
  
  
  
  
5. How do you know when you are getting stressed out? What are the cues for you?
  
  
  
  
  
  
  
  
6. How well do you accept direction from others?
  
  
  
  
  
  
  
  
7. What behavior in other people do you find difficult to cope with? How do you handle that?

8. Give an example of when you have had to be extremely tolerant of other people.
  
  
  
  
  
  
9. How do you know when you cannot help a friend or relative any more than you already have? How do you draw a line?
  
  
  
  
  
  
10. What is the longest personal commitment to others you have made? Explain.
  
  
  
  
  
  
11. What are your strengths and weaknesses as a friend?

**SUPPORT SYSTEM:**

1. What supports do you have in your life (friends, family, church, counselor, clubs, support groups)?
  
  
  
  
  
  
2. Who do you turn to when you need to talk to someone? Who do you get your best advice from?
  
  
  
  
  
  
3. When you told people you were considering providing foster care, how did they respond?

**PARENTING SKILLS:**

1. What experience do you have caring for children?
2. What do you enjoy most about parenting?
3. What is most challenging to you about parenting?
4. How do you take an active role as a parent? Give examples (homework, playing, engaging in activities, reading to child, etc.)
5. What are your expectations regarding children's behavior? How do you manage negative behaviors such as jealousy, fighting or competition?
6. How do you determine supervision needs for children?
7. How do you nurture children?
8. How do you show affection towards your child(ren)?

9. Describe your parenting style. Describe your partner's parenting style.

10. What kinds of disciplinary methods do you currently use?

11. Have you and your partner disagreed about disciplining your child(ren)? How did you settle the difference?

12. What past experiences (both good and bad) have you had with the school systems? Do you feel equipped to advocate for a child in school if necessary? Explain.

13. How comfortable are you with your knowledge of child development? If you needed to get information regarding child development, where would you turn? What resources would you explore?