

FOSTER GRANDPARENT PROGRAM APPLICATION

Name _____ Date _____

Signature _____

Address _____
Street City State Zip

Telephone _____ Social Security No. _____

Age _____ Birth Date _____ Birth Place _____ Married () Single () Widowed () Divorced ()

Years of School Completed _____ Previous Occupations _____

Physical Condition: Excellent ___ Good ___ Fair ___ Poor ___ Please Explain _____

PLEASE LIST INCOME SOURCES AND AMOUNTS FOR CURRENT YEAR

SOCIAL SECURITY	\$ _____	TOTAL NUMBER OF PERSON IN HOUSEHOLD _____
SSI	\$ _____	
PENSION/RETIREMENT	\$ _____	OUT OF POCKET MEDICAL EXPENSES PER MONTH \$ _____
SPOUSE INCOME	\$ _____	
INTEREST	\$ _____	ESTIMATED INCOME FOR NEXT 12 MONTHS _____
STOCKS & BONDS	\$ _____	
OTHER	\$ _____	
TOTAL:	\$ _____	

Why you wish to be a Foster Grandparent? _____

What kind of transportation do you plan to use? _____

Memberships, Hobbies, Special Skills, Language(s) Spoken: _____

Willing to Volunteer: Mornings ___ Afternoons ___ Evenings ___

DO YOU HAVE ANY CRIMINAL CONVICTIONS (OTHER THAN PARKING VIOLATIONS AND JUVENILE OFFENSES)?
YES ___ NO ___ IF YES PLEASE DESCRIBE: _____

PLEASE LIST TWO CHARACTER REFERENCES (NOT RELATIVES)

<u>Name</u>	<u>Address</u>	<u>City</u>	<u>Phone</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____

SUBMIT TO: Porter-Leath Foster Grandparent Program, 868 N. Manassas Street, Memphis, TN 38107