



Application

Name(s): _____

Address: _____

City/State/Zip: _____

County: _____

How long at current address: _____ How long have you lived in your current STATE? _____

*****If you or anyone in your home has NOT been a resident of your current state for 5 years, please attach a list of each address; city and state you/they have lived in for the past 5 years.**

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

	Applicant 1	Applicant 2
Full Name		
Other Names Known By		
Email Address		
Eye & Hair Color		
Date of Birth		
City & State of Birth		
Gender at Birth		
Current Sexual Orientation		
Nationality & Heritage		
US Citizen? (Yes or No)		
Social Security #		



Drivers License #		
Currently on Disability? (Yes or No)		
Employer & Occupation		
Height & Weight		
Have Children (Adopted/Biological)		
Current Yearly Salary		

Present Marriage Name of Spouse: _____

Marriage Date: _____ City: _____ State: _____ County: _____

	Applicant 1	Applicant 2
Previous Marriage Date		
City		
State		
County		
Previous Marriage Date		
City		
State		
County		

Minor or Adult Children in or out of the home

Name: _____

Name: _____

Date of Birth: _____

Date of Birth: _____

Gender: _____

Gender: _____

Adopted or Biological: _____

Adopted or Biological: _____

Others in the home



Name: _____

Name: _____

Date of Birth: _____

Date of Birth: _____

Gender: _____

Gender: _____

Adopted or Biological: _____

Adopted or Biological: _____

Which religion (if any) do you practice? _____

Do you plan to raise your children the same? _____

Type of Water/Waste Disposal

City Water _____

City Sewage _____

Well Water _____

Septic System _____

Nearest Hospital _____

Nearest Fire Department _____

Nearest Elementary School _____

Nearest Middle School _____

Nearest High School _____

How did you find Connected by Love Adoptions? _____

I/We have completed this client information sheet accurately to the best of my/our knowledge. I/We agree to inform Connected by Love Adoptions of any changes that occur with any of this information during the home study process. I/We understand that failure to disclose information may delay or terminate the home study process.

Applicant 1 Signature: _____ Date: _____

Applicant 2 Signature: _____ Date: _____