

REFERENCE QUESTIONNAIRE – NON-RELATIVE

Date: _____

Re: _____

Name of Prospective Adoptive Family

Dear _____

The above named individual has given you as a personal reference in his/her application to become an adoptive parent.

As you answer each question below, please keep in mind that it is the responsibility of each of us to safeguard the welfare and future development of children. We find it very helpful to have the opinion of those who have known a person well enough to judge his/her ability to provide a stable home for a child. We realize this is a serious responsibility for you since the child's future happiness and well-being hinges on a parent's ability to provide a wholesome, loving home.

Answer each question below, using additional paper if necessary. The counselor may contact you personally to discuss your statements with you.

Your Phone Number () _____ () _____
Home Work
() _____ () _____
His Cell Her Cell

1. How long have you known applicant? _____
2. What is your relationship to the applicant? _____
3. How often do you see or have contact with him/her? _____
4. Do you think that the applicant displays an attitude to willingness to work with others in approaching a problem? _____ Yes _____ No Why? _____

5. To the best of your knowledge, do the applicant (s):
- a) Live within their income? ___ Yes ___ No ___ Don't Know
 - B) Respect their neighbors property rights? ___ Yes ___ No ___ Don't Know
 - c) Keep up their own property? ___ Yes ___ No ___ Don't Know
 - d) Disrupt the neighborhood? ___ Yes ___ No ___ Don't Know

6. Describe the applicant's homemaking abilities (cooking, housecleaning, washing).

7. If applicable. Please describe how the applicant(s) treat their children.

8. How do they treat other people's children?

9. What disciplinary measures do they employ?

10. If applicable, please describe how the applicant (s) children treat other children, adults, pets, personal property, etc.

11. To your knowledge, are the applicants in good health? _____ Yes _____ No

If not, explain

12. Individual Personality: Check all that apply.

	Man	Woman
Conscientious	_____	_____
Perfectionist	_____	_____
Strong-willed	_____	_____
Sense of Humor	_____	_____
Stubborn	_____	_____
Shy	_____	_____
Aggressive	_____	_____
Diplomatic	_____	_____
Quiet	_____	_____
Withdrawn	_____	_____
Gossipy	_____	_____
Confident	_____	_____
Stable	_____	_____
Thoughtful	_____	_____
Close-minded	_____	_____
Opinionated	_____	_____
Compulsive	_____	_____
Cheerful	_____	_____
Prejudiced	_____	_____
Pessimistic	_____	_____
Critical	_____	_____
Neat	_____	_____
Nervous	_____	_____
Nagging	_____	_____
Likable	_____	_____
Warm	_____	_____
Tolerant	_____	_____
Rigid	_____	_____
Flexible	_____	_____
Persistent	_____	_____
Mature	_____	_____
Immature	_____	_____

13. Values: Do the applicant (s) place high, medium, low value on the following:

Money_____ Education_____ Appearance (own)_____
Appearance (others)_____ Personal Property_____
Manners_____ Religion_____ Achievement_____
Social Status_____ Work _____

14. To your knowledge, does the applicant (s) for whom you are witnessing, have any problems in the following areas? Yes/No

Abuse of Alcohol_____
Abuse of Drugs/Narcotics_____
Criminal Involvement_____

If the answer to any of the above is yes, please explain_____

15. Do you personally feel that the applicant (s) have good principals and moral standards?_____

16. Are you aware of any serious problem they might have that would affect a child's well being?

17. Do you feel the applicant(s) have the ability to give love and security to a child?_____

If there is a need to talk with the writer about this matter, please do not hesitate to contact us.

We appreciate your assistance in furnishing us this information in writing. Please be assured that this information will be kept confidential.

**Additional
Comments:**

SIGNATURES

Name

Date Signed

Name

Date Signed

Thank you,

Sincerely,

Rhonda Clarkson

Social Worker

(ed: 11/26/13)