

Foster Parent Background Check Agreement

This agreement is made between the undersigned applicant(s) and the foster care agency in compliance with all applicable state and federal laws regarding background checks for foster parent applicants.

Applicant Information

Full Name

Date of Birth

Current Address

Phone Number

Email

Authorization

I hereby authorize the foster care agency to conduct a comprehensive background investigation including but not limited to: criminal history, child abuse registry checks, and fingerprinting as required by law. I agree to provide all required information and documentation to facilitate this process.

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By checking this box, I confirm that I have read and agree to the above statement.

Additional Information (optional)

Applicant Signature

Date

Co-Applicant Signature

Date