

 Department of Children & Family Services <i>Building a Stronger Louisiana</i>	Division/Section	Child Welfare
	Chapter No./Name	9 – Home Development
	Part No./Name	Appendix Q – Adult Child Reference for Relative/Kin Certification
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	Document No./Name	Appendix Q – Adult Child Reference for Relative/Kin Certification
	Effective Date	April 1, 2024

➤ PURPOSE

The Adult Child Reference Form is used to document information concerning the character of **relative/kin caregiver** applicants and their ability to care for children. The information is provided by adult children of the applicants in accordance with the minimum requirements of the agency.

➤ PREPARATION

The Home Development (HD) Worker completes the Adult Child Reference **RK** Form in single copy by writing the name of the **relative/kin caregiver** ****** applicant. *******

*** The HD worker completes the reference by calling the adult child(ren) identified by the relative/kin caregiver applicant. During the call, the adult child is to answer the questions with personal knowledge or opinion about the applicant(s). The HD worker records the information gained during the interview on the Adult Child Reference RK Form. The HD worker writes the adult child's name, address, and phone number on the bottom of the form under the reference contact information section. The HD worker writes their information, name, region, phone number, and date reference completed on the bottom of the form under the home development worker completing reference section. ********

The HD Worker shall document on the CR-8 the date the reference *** was contacted and the date the reference was completed.**

➤ DISPOSITION

When the completed original is returned by the adult child reference, it shall be filed in Section I of the foster/adoptive parent's case record.

When the **adult child reference is ****** completed *********, it shall be filed in *** Section III** of the **relative/kin caregiver's ****** case record.**

ADULT CHILD REFERENCE for RELATIVE/KIN CERTIFICATION

*(Note: If there are two applicants, please comment on each applicant separately.
If a question does not apply to the applicant, please write "N/A".)*

How are you related to each applicant? (Example: biological child, stepchild, grandchild, other)

Applicant 1's Name: _____ **Relationship** _____

Applicant 2's Name: _____ **Relationship** _____

1. How would you describe your upbringing with the applicant(s)?

Applicant 1: _____

Applicant 2: _____

2. With whom did you live with until adulthood? How old were you when you left home and why did you leave?

3. What do you believe are each of your parent's strengths? Limitations, if any?

Applicant 1: _____

Applicant 2: _____

4. What forms of discipline were used in your home and who disciplined you?

Applicant 1: _____

Applicant 2: _____

5. Do you feel that you were abused or neglected in any way? Were you a victim of domestic violence? Explain.

6. How do you feel about your parents/caregivers becoming relative/kin foster caregivers? Explain.

Applicant 1: _____

Applicant 2: _____

7. Would you recommend your parents/caregivers becoming relative/kin foster caregivers? WHY or WHY NOT?

Applicant 1: _____

Applicant 2: _____

Reference Contact Information:

Name: _____

Phone Number: _____

Mailing Address: _____

Street Address _____

Home Development Worker Completing Reference:

Name: _____

Region: _____

Phone Number: _____

Date Reference Completed: _____