



The Confederated Tribes of the Grand Ronde Community of Oregon  
Phone (503) 879-2034 or 1-800-242-8196  
Fax (503) 879-2142

9615 Grand Ronde Road  
Grand Ronde, OR 97347

Applicant Name: \_\_\_\_\_

## PERSONAL QUESTIONNAIRE & HISTORY

Please complete the following forms as completely & honestly as possible. Each child in care is unique. The following answers will assist us in the placement process and necessary support services. Thank You!



# LIFE EXPERIENCES

1. Where were you born? \_\_\_\_\_

2. Please describe your family.

Include: Names of your parents & siblings, ages of family members, how much contact you continue to have with each of them today.

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3. Please describe your childhood.

Include the unwritten rules of the house, how you were disciplined, where did you grow up, the positives/negatives, and your relationships with family members.

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4. Who was the most important person to you as a child, and why? \_\_\_\_\_

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5. Describe the most difficult thing you experiences as a child, and how you got through it.

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6. Describe any physical, sexual or emotional abuse you, or any member of your family have experienced and anything you have done to deal with it:

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## SELF ASSESSMENT

1. Describe yourself. Please include physical description, health & personality.

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2. Have you ever had a problem with law enforcement authorities? (I.e. Charged with a crime, arrested, spent time in jail, were on probation, etc.) Do you now or have you ever had a police record, as an adult or juvenile? Please describe when and the circumstances.

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3. Have you ever had a problem with drugs and/or alcohol? Do you now or have you ever been involved in a drug and/or alcohol treatment program? Please describe when and the outcome.

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4. What three things do you like best about yourself? What about yourself do you take the most pride in? What positive personal changes have you made as an adult?

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5. What three things about yourself would you like to change? What do you regard as your primary source of frustration? What's been your greatest personal disappointment?

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6. What sort of things make you angry? Sad? How do you deal with negative feelings or down times in your life (i.e. when troubled, confused, hurt, or anxious). How do you cope with or escape from these feelings?

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7. Have you been in therapy or been in treatment for emotional difficulties? If so, please describe circumstances.

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8. What are the three major goals for yourself you hope to achieve in the next five years?

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9. What support system's do you and your family currently have in place? (family, friends, community, religious)

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## PARENTING & FAMILY VALUES

1. Describe your own children.

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2. What experiences have you had with children misbehaving or not meeting your expectations? How does this make you feel? How did/do you respond?

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3. How do you or how would you discipline children (be specific)? Do you employ physical punishment? If so, what form does it take, how often and under what circumstances?

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4. Do you feel comfortable discussing difficult subject matter with children? How would you handle it? (i.e. questions regarding their abuse, abandonment, etc.)

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5. How do you plan on helping this child to adjust to your family? How will you help this child deal with his or her losses?

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6. Are you willing to be involved in on-going family counseling if it supports your foster child's adjustment in your family? If not, why?

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7. If the adults in your household are each working, what is your child care plan?

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8. How do you spend your leisure time? What are your family activities?

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9. Does your family celebrate holidays, birthdays, etc.? \_\_\_\_\_

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## RELATIONSHIP

1. How did you meet your present spouse or partner? What about him/her attracted you?

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2. What do you feel are the strengths in your current relationship?

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3. Describe your partner's personality.

Please include: How you are alike and how you are different; how have you accommodated the differences; what would you change about your partner; have you tried to get him/her to change; what was the result; how would he/she describe you; how does your partner cope with stress?

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5. Do you agree on child rearing methods and discipline? If not, where do you disagree? How do you handle differences in this area?

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## Culture

1. What is your connection with the Confederated Tribes of Grand Ronde?

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2. Every foster parent with the Confederated Tribes of Grand Ronde has a Cultural Plan, what would you personally add to your Cultural Plan to keep foster youth in your care connected to the Tribe?

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Co-Applicant Name: \_\_\_\_\_

## **PERSONAL QUESTIONNAIRE & HISTORY**

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## MOTIVATION

1. Why are you interested in becoming a foster parent for the Grand Ronde Tribe?

Please include the following: When you first started thinking about foster parenting; how long have you thought about it; what experiences you have had with foster parenting; whose idea it was; what will foster parenting provide for you; what can you provide for a foster child; what reaction have you had from your birth children, your extended family, your friends, your employer?

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2. What are your primary fears, hesitations, concerns or uncertainties about foster parenting at this time? About the children available? About your capacities to succeed?

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3. Describe the type of child(ren) you see becoming members of your family. Please include: Sex, age, personality, special needs, and any child you could not accept.

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