

A Child Waits Foundation

Domestic Adoption Grant Program

1136 Barker Road, #12

Pittsfield, MA 01201

Phone: 866-999-2445 Fax: 518-794-6243

Email: cnelson@achildwaits.org Web: www.achildwaits.org

Grant Application Instructions

- A Child Waits Foundation accepts applications after a homestudy has been completed and prior to your adoption being finalized.
- The grant request should include: the six application forms and supporting documents.
- Provide a cover letter that describes the path you took to pursue adoption, the stage you have reached in your adoption and any other pertinent information regarding your motivation to adopt. Include information about your fundraising efforts, donations, help from extended family, and other grants you have applied for or received.

Child Information Instructions

If you are adopting through a traditional newborn domestic program, you will most likely not have the child's information at the time you apply. If you have not been matched or the baby has not been born, we will hold your grant application until the baby's information is available.

Application Submission

Email to: deanna@achildwaits.org

Or

Mail to: A Child Waits Foundation
1221 State Route 20
New Lebanon, NY 12125

A Child Waits Foundation Domestic Grant Application

Phone: 866-999-2445 Fax: 518-794-6243
Email: cnelson@achildwaits.org Web: www.achildwaits.org

Domestic Grant Program Documents Checklist

Family Name: _____ Date: _____

Please use this checklist to confirm you have included all necessary documents. **If you haven't been matched you may still apply**, and we will wait to submit your application to the Board until after we receive the picture and medical of your child.

√	A Child Waits Forms
	Grant Application - Family/Adoption Information
	Financial Statement
	Monthly Budget Form
	Adoption Expense Form
	Grants, Fundraising and Donations Form
	Consent Form

Supporting Documents/Other

	Home study
	Cover letter - See instructions to be sure your cover letter includes the requested information.
	Most recent 1040 with attachments - include schedule C if business owner
	Most recent copy of pay stub for all applicants
	Picture & medical of child being adopted - We can hold the application until this is available.
	Picture of current family

Submit application, cover letter and supporting documents to:

Email to: deanna@achildwaits.org

or

Mail to: A Child Waits Foundation
1221 State Route 20
New Lebanon, NY 12125

A Child Waits Foundation - Domestic Grant Application

Family and Adoption Information

Adoptive Parent 1

Name: _____ Age: _____
 Email: _____
 Cell: _____ Text: Yes _____ No _____
 Occupation: _____
 Employer: _____

Adoptive Parent 2

Name: _____ Age: _____
 Email: _____
 Cell: _____ Text: Yes _____ No _____
 Occupation: _____
 Employer: _____

Current Family Profile

Marital Status: Single _____ Married _____ Other _____ # of Children: _____ # of Children at home: _____
 # of Children: Adopted: _____ Biological: _____ Foster: _____ Step Children: _____ Other: _____
 Name and ages: _____
 Current Address: _____ City, State, Zip: _____
 Is the child or children being adopted currently living in your home? Yes/No If yes, how long? _____

Child and Travel Information

If child information is unknown, you may still apply and provide us with an update once you have been matched.

Is this a relative adoption? Yes/No If adoption related travel is required, please provide information below:
 Expected Travel Date: _____ City/State: _____
 Expected Length of Stay: _____ Family Members Traveling: _____

Child to be Adopted

Name	Age	Sex	Special Need

Adoption Professionals Name/Address:	Contact	Email/Phone
Home Study Agency:		
Adoption Agency:		
Attorney:		

How did you hear about A Child Waits Foundation? _____

A Child Waits Foundation Domestic Grant Application

Financial Statement and Monthly Budget

Adoptive Parent 1

Name: _____
 Gross: _____ Net: _____
 Other Income: Type: _____ Amt: _____

Adoptive Parent 2

Name: _____
 Gross: _____ Net: _____
 Other Income: Type: _____ Amt: _____

For income above, please list your gross, before taxes & your net income, after taxes for the current year. Please include any other forms of income you may have, i.e. disability, child support, social security, etc.

Joint Assets and Liability Information

Assets - What I Own:

Home (current market value) _____
 2nd Home (current market value) _____
 Total Savings & Checking _____
 Stocks and Bonds _____
 401K/Retirement Accounts _____
 Other (describe): _____

 Total of All I Own _____

Liabilities - What I Owe:

Mortgage Balance _____
 Mortgage Balance on 2nd Home _____
 Home Equity Loan/Credit _____
 Education Loans _____
 Credit Cards _____
 Other Liabilities (describe): _____

 Total of All I Own _____
 Total of Liabilities _____
 Total Net Worth _____

Monthly Budget

Monthly Take Home Pay - Income after Taxes:	Monthly Amount
Income Parent 1	\$ _____
Income Parent 2	\$ _____
Other Forms of Income - Please List: _____	\$ _____
	\$ _____

1. Total Monthly Income: \$ _____

Monthly Household Expenses/Monthly Loans Payments

Monthly Household Expenses

Expense Type	Payment
Rent	
Utilities/Internet	
Insurance	
Groceries	
Personal Care/Clothing	
Entertainemnt/ Activities	
Child Care/Education	
Medical Co-Pays/Meds.	
Other	
2. Total	

Monthly Loan Payments

Debt Type	Payment
Mortgage:	
Education Loans:	
Auto Loans:	
Home Equity Loan:	
Credit Cards:	
Adoption Loans:	
Other Debt:	
Other:	
Other:	
3. Total	

4. Total Expenses (Line 2 + Line 3) _____

5. Money Left (Line 1 minus line 4) _____

A Child Waits Foundation Domestic Grant Application

Adoption Expenses

Family Name: _____

Date: _____

Type of Expense	Total Cost	Amount Paid
Agency Fees		
Attorney Fees		
Fees Paid to Matching Service		
Home Study Agency/Updates and Preparation		
Birth Mother Expenses		
Birth Mother Attorney Fees		
Consultant Fees		
Adopted Child's Medical Exam/Medical Expenses		
Document Preparation Fees		
ICPC and/or Court Fees		
Post Placement Reports		
Other - Please Explain:		
Other:		
Other:		
Total Cost of Adoption:		Total Paid:

Travel Expenses if Applicable:

Trip 1: Flight/Car Rental/Transportation/Gas		
Trip: 1 Food and Lodging		
Other:		
Total Cost for Travel:		Total Paid:

A Child Waits Foundation Domestic Grant Application

Grants, Fundraising and Donations

Please list organizations and amounts below and use the back of this form if necessary.

Family Name: _____

Date: _____

Grants Awarded

1.	Foundation or Organization	Amount	Funds Received		Funds Used		Matching Grant	
			Yes	No	Yes	No	Yes	No
2.		\$	Yes	No	Yes	No	Yes	No
3.		\$	Yes	No	Yes	No	Yes	No
4.		\$	Yes	No	Yes	No	Yes	No

Grants Pending/Not Awarded

1.	Foundation or Organization	Current Status
2.		
3.		
4.		

Completed Fundraisers

1.	Type of Fundraising Completed	Amount Raised	Funds Used	
2.		\$	Yes	No
3.		\$	Yes	No
4.		\$	Yes	No

Fundraisers - Planned or in Process

1.	Type of Fundraising Planned	Planned or in Process	Amount Projected
2.			\$
3.			\$
4.			\$

Donations from Friends, Family or Church

1.	Name	Amount	5.	Name	Amount
2.		\$	6.		\$
3.		\$	7.		\$
4.		\$	8.		\$

Have all donations listed above been used? _____

List any social media, blogs, fundraising or crowdfunding sites: _____

Are you carrying any debt for this adoption? Yes: _____ No: _____ Type: _____ Amount: \$ _____

Will you receive any employer reimbursements for your adoption, before or after finalization? Yes _____ No _____

Whose Employer: _____ Before _____ After _____ Amount: \$ _____

