Home Study Agency - Social Worker Form  
A Child Waits Foundation Domestic Grant Application  
1136 Barker Rd, Unit 12, Pittsfield, MA 01201  
Phone: 866-999-2445 Fax: 518-794-6243  
Email: deanna@achildwaits.org Web: www.achildwaits.org  

A Child Waits Foundation provides grants to families to help with some of their financial barriers to adoption. Our programs are designed to help families who are able to personally pay a portion of the cost of the adoption but still need additional assistance. The family has given us written permission to request this information. Please mail, email or fax this form to the Foundation using the information provided above.

Adoptive Parent’s Name: ______________________________________________________________  
Adoptive Parent’s Phone Numbers: ___________________________________________________  
Home Study Agency: ____________________________ Date: ____________________________  
Name/Signature of Person Completing Form: ________________________________ Phone: ________  

How long has the family been in the adoption process? ____________________________________  

Financial Information

Did the family express concerns about affording this adoption?  
__________________________________________________________________________________  

Will there be a future loss of income as a result of the adoption? For example, will there be a change in employment, additional daycare costs, etc. ____________________________________________  

What is the cost for the homestudy and post placements? _________________________________  

When are the post placement report fees due? _____________________________________________  

Do you feel this family demonstrates a financial need for a grant? _________________________  

Additional Comments: ________________________________  

__________________________________________________________________________________  

Thank you for taking the time to complete this form. If you would like us to send your agency brochures about our loan and grant program, please provide your name and mailing address: ____________________________  

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