

WANSLEA FOSTER CARE APPLICATION FORM

In accordance with the Privacy Amendment (Private Sector) Act 2000) the personal information collected about families will be used in a confidential manner by Wanslea staff strictly for the purpose of facilitating the Foster Care Program. Carers are able to access their own information. All enquiries should be directed to the Manager.

Applicant One:

Surname: _____ First Name: _____

Birth name (other names you have be known by): _____

Date of birth: _____ Sex: Male / Female

Address: _____

Postcode: _____

Phone: home: _____ work: _____ mobile: _____

Email: _____

Country of Birth: _____ Period of residence in Western Australia: _____

Do you identify as Aboriginal or Torres Strait Islander? Yes / No

Religion: _____ Practising: Yes / No

Occupation: _____ Hours of work: _____

Applicant Two:

Surname: _____ First Name: _____

Birth name (other names you have be know by): _____

Date of birth: _____ Sex: male / female

Address: _____

Postcode: _____

Phone: home: _____ work: _____ mobile: _____

Email: _____

Country of Birth: _____ Period of residence in Western Australia: _____

Do you identify as Aboriginal or Torres Strait Islander? Yes / No Religion: _____

Practising: Yes / No

Occupation: _____ Hours of work: _____

Applicant One:

Current Marital Status: (Please tick which applies to you)

- Married: Date: / /
- Widowed: Date: / /
- Divorced: Date: / /
- Separated: Date: / /
- Defacto: Date: / /
- Single:

Applicant Two:

Current Marital Status: (Please tick which applies to you)

- Married: Date: / /
- Widowed: Date: / /
- Divorced: Date: / /
- Separated: Date: / /
- Defacto: Date: / /
- Single:

Please provide details of all your children (present and previous marriages)

Name	Male/Female	Date of birth	Living at home? Write Yes or No

Please list any other people living in your household- adults and children

Name	Male/Female	Date of birth	Relationship to you

Referees

Please provide the names and addresses and telephone numbers of two persons, not related to you, willing to provide character references in relation to your family and your suitability to foster. Please also include an additional work related referee. Referees should have known you for at least 5 years. Information received from referees will form part of our assessment of you and will be kept confidential.

Personal:

1. Name: _____ Relationship to you: _____
Telephone: _____ Email: _____
Address: _____
_____ Postcode: _____

2. Name: _____ Relationship to you: _____
Telephone: _____ Email: _____
Address: _____
_____ Postcode: _____

Work Related:

Applicant One:

Name: _____ Telephone: _____
Address: _____
_____ Postcode: _____

Applicant Two:

Name: _____ Telephone: _____
Address: _____
_____ Postcode: _____

Health and Life Events

Most people have medical, health or life events that happen to them. Some of these may have an impact on your application to foster. Fostering may place you under stress so it is important that we are aware of any such issues so that we don't put your health or that of your family at risk. You will also need to complete the consent for release of medical information forms at the first interview.

Life Events: Please make comments and write date of event/diagnosis

Birth of a child

Marriage or divorce

Bereavement- death of a significant person

Move house/state/country

Change of employment

Fertility treatment

Medical /Health Issues:

Any medical ailments and conditions (ulcers, epilepsy, high blood pressure or asthma)

Major operation

Terminal illness

Psychiatric /Psychological Issues

Do you smoke? Y/N how many per day_____ Drink alcohol? Y/N how many per day? _____

Do you currently or in the past used illicit drugs Y/N _____ Dates_____

If yes what type of drug and frequency of use _____

Applicant One:

Doctors Name: _____

Address: _____ Phone: _____

Applicant Two:

Doctors Name: _____

Address: _____ Phone: _____

There are different types of foster care:

You do not have to make a definite decision now, but it would help us to know which of these you are interested in. Please tick as many as you wish. Please refer to the information pack about the different types of care, to help you make a decision.

- Emergency care:
- Short term
- Long term:
- Respite:
- Specialist care:

If you have had any previous experience as a foster carer, please briefly describe your experience and the agency or Department where you were registered.

General background information

If more than one applicant, this section can be completed jointly.

- a) Why do you want to become a foster carer of children?

- b) Do you know any families who are foster carers?

d) What difficulties/problems or worries do you think children in foster care would have?

e) What role do you think the child's birth parents play when their child/ren are in foster care?

f) What role do you think foster carers play in the lives of children?

g) Many foster care applicants have some worries/questions about what they are getting themselves in for. What are yours?

h) Tell us about the safety measures that you have taken to ensure your home is safe for children i.e. pool safety, storage of poisons and chemicals etc.

Thank you very much for your interest in fostering.

Please return this completed form in the reply paid envelope.

**Wanslea Family Services
PO Box 211
Scarborough WA 6922**

**Phone: (08) 9245 2441
Fax: (08) 9245 2481
www.wanslea.asn.au**



**The Department for Child Protection and Family Support
Foster Carer Directory of Western Australia**

Applicant Information and Acknowledgment Form

This form must be signed prior to the recording and retrieval of information on the Directory

The Department for Child Protection Foster Carer Directory of Western Australia (the Directory) has been established to provide a central database of non-government service provider foster carers who provide care to children in the care of the Department for Child Protection (also called children in the CEO's care).

The Directory is a child protection strategy that allows the tracking of a person's history as a foster carer. Information is placed on the Directory by the participating service providers and strict procedures are in place to ensure confidentiality. Information on the Directory is held on a secure database with restricted access.

Non-government foster care service providers in Western Australia record on the Directory all carer applications, the result of each application, any subsequent registration and any changes to a person's carer status or personal details. This includes proof of police and departmental screening and Working with Children checks.

No placements of children in the CEO's care may be made with a foster carer who has not been listed on the directory, and assessed and approved to care for children in the CEO's care.

Applicants for foster care must be aware that application to be a foster carer to care for children in the CEO's care in WA requires:

- The recording on the Directory of my personal details;
- The recording on the Directory of the result of my application and any subsequent applications;
- The recording on the Directory of any changes to my personal details or changes in my foster carer approval status;
- The release of information to participating service providers about any of my prior or current applications or information about my carer approval status.
- The release of information to interstate service providers about any of my prior or current applications or information about my carer approval status, and/or any other information held by the Department for Child Protection that relates to my capacity to care for children, should I apply to be assessed as a carer in another state or territory.

For further information about the Directory contact the service provider to whom you are applying to be a foster carer. Or you can contact the Custodian of the Directory at Fostering Services at the Department for Child Protection.

Acknowledgment and Declaration

- I have read and understood the information provided above about the Department for Child Protection Foster Carer Directory of Western Australia.

- I understand that my application as a foster carer in WA may involve:
 - The recording on the Directory of my personal details;
 - The recording on the Directory of the result of my application and any subsequent applications;
 - The recording on the Directory of any changes to my personal details or changes in my foster carer approval status;
 - The release of information to participating service providers about any of my prior or current applications or information about my carer approval status.
 - The release of information to interstate service providers about any of my prior or current applications or information about my carer approval status, and/or any other information held by the Department for Child Protection that relates to my capacity to care for children, should I apply to be assessed as a carer in another state or territory.

- I declare that, to the best of my knowledge, the information I have provided to the identified service provider and the Directory as part of this application is true and correct.

Service provider Name or Stamp

WANSLEA

Name of Applicant 1

_____ **Signature** _____ **Date** _____

(please print)

Name of Applicant 2

_____ **Signature** _____ **Date** _____

(please print)