



APPLICATION FOR POST-ADOPTION FINANCIAL ASSISTANCE
Please complete in full and print legibly or type.

Date _____

Amount of financial assistance requested \$ _____

What are funds being used for? (Please include quote from service provider or proof of price in catalogue of item being requested for funding)

Adopting father's name _____ **Email address** _____

Street Address _____ **City** _____ **Province** _____

Postal Code _____

Home phone (____) _____ **Cellular phone** (____) _____

Occupation _____

Name of employer _____

Monthly salary (gross) \$ _____ **Employed since** _____

Previously employed as _____

Name of previous employer _____

Age _____ **Date of birth** ___/___/___

Citizenship: ___ CANADIAN **Other:** _____ **In Canada since** _____



Adopting mother's name _____ Email address _____

Occupation _____

Name of employer _____

Monthly salary (gross)\$ _____ Employed since _____

Age _____ Date of birth ____/____/____

Citizenship: ____ CANADIAN Other: _____ Date of Marriage: _____

Current Dependents

Name	Age	Relationship
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		



Details of Adoption

Who are these services or equipment for?

Where did you adopt from?

What special needs and/or diagnoses does your child have?

What supports are already in place for this child?

Post-Adoption Assistance is provided in an effort to support families with children with special needs. These funds are intended for families that have exhausted all other avenues and do not have extended health or other means to cover these costs. This is an honor system and we ask that you agree to these terms before applying.

Do you consent to the above post-adoption requirements? Yes No

In the event that we do not have the funding to approve this request at this time, please indicate below whether you would like to continue being considered for the following 6 months.

Yes No

Can we add you to our monthly email newsletter list? Yes No



We understand and agree that Home for Every Child Adoption Society is not obligated to provide any assistance to us. Approval is based upon available funding, board approval, and need.

_____ Yes _____ No

Signature of Adopting Father

Signature of Adopting Mother

Mailing Information

Please submit your completed application along with a copy of the following documents to:

Home for Every Child Adoption Society
3875 202 Street
Langley, BC V3A 1R9

If you prefer, you can submit the application online and provide the other documents to us electronically to ahomeforeverychildbc@gmail.com

_____ Copy of current driver's licenses

_____ Copy of most recent paycheck stub for you and your spouse (if your spouse is employed outside the home.)