

Phoenix Christian Foster Family Support Program 2019-2020 Application

Please complete this application (OR complete the application online: goo.gl/ZYTujJ) to be considered for our Foster Family Support Program. Feel free to reach out to FosterCare@phoenixchristian.org for any additional information.

Family Information

Foster Father:

First

Last

Phone Number

Email

Foster Mother:

First

Last

Phone Number

Email

Name of Licensing Agency:

(If you are not licensed, please indicate if you are kinship/guardianship/have a closed license...)

Agency Case Worker:

First

Last

Phone Number

Email

Church:

Address

Foster Children (include all who are applying to attend PCPS)

Child #1:

First

Last

M.I.

Grade Applying For

DOB

How long has this child been in your care? _____

Does this child qualify for the Plus/Overflow Tax Credit? YES NO I DON'T KNOW

Children qualify for the Plus/Overflow Tax Credit if they meet one of the following criteria: 1) They have received the credit in the past. 2) They are entering Kindergarten. 3) They attended a public or charter school for at least 90 days last year. 4) They are a military dependent. 5) They previously received a corporate tax credit.

Will this child receive ESA money? YES NO I DON'T KNOW

If yes, how much do you expect to receive annually? _____

Is there any information about this child that you would like to share with the teacher?

Child #2:

First

Last

M.I.

Grade Applying For

DOB

How long has this child been in your care? _____

Does this child qualify for the Plus/Overflow Tax Credit? YES NO I DON'T KNOW

Children qualify for the Plus/Overflow Tax Credit if they meet one of the following criteria: 1) They have received the credit in the past. 2) They are entering Kindergarten. 3) They attended a public or charter school for at least 90 days last year. 4) They are a military dependent. 5) They previously received a corporate tax credit.

Will this child receive ESA money? YES NO I DON'T KNOW

If yes, how much do you expect to receive annually? _____

Is there any information about this child that you would like to share with the teacher?

If you have additional foster children, please continue on a second form and attach to this application.

**Biological/Adopted Children
(include all who are applying to attend PCPS)**

Child #1:

First

Last

M.I

Grade Applying For

DOB

Has this child ever been in the foster care system? YES NO

Does this child qualify for the Plus/Overflow Tax Credit? YES NO I DON'T KNOW

Children qualify for the Plus/Overflow Tax Credit if they meet one of the following criteria: 1) They have received the credit in the past. 2) They are entering Kindergarten. 3) They attended a public or charter school for at least 90 days last year. 4) They are a military dependent. 5) They previously received a corporate tax credit.

Will this child receive ESA money? YES NO I DON'T KNOW

If yes, how much do you expect to receive annually? _____

Is there any information about this child that you would like to share with the teacher?

Child #2:

First

Last

M.I

Grade Applying For

DOB

Has this child ever been in the foster care system? YES NO

Does this child qualify for the Plus/Overflow Tax Credit? YES NO I DON'T KNOW

Children qualify for the Plus/Overflow Tax Credit if they meet one of the following criteria: 1) They have received the credit in the past. 2) They are entering Kindergarten. 3) They attended a public or charter school for at least 90 days last year. 4) They are a military dependent. 5) They previously received a corporate tax credit.

Will this child receive ESA money? YES NO I DON'T KNOW

If yes, how much do you expect to receive annually? _____

Is there any information about this child that you would like to share with the teacher?

If you have additional children, please continue on a second form and attach it to this application.