

# Project Home Foundation

## House Parent Application

Project Home Foundation looks for high mission-driven candidates who have experience working with young adults, community living, and have an ability to create and support a community family atmosphere to serve as House Parents. If you have received this application, then those qualities have been recognized in you. Please share with us the following information as we consider your candidacy for this life changing opportunity.

### 1. Personal Information

Parent A:

Full Name: \_\_\_\_\_

Previous Marriages: Y/N      If yes, complete the following:

Name(s) of Previous Spouse(s): \_\_\_\_\_

Date(s) of Marriage(s)/ Divorce(s): \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_      Age: \_\_\_\_\_

Current Employment: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Work Number: \_\_\_\_\_      Years Employed: \_\_\_\_\_

Parent B:

Full Name: \_\_\_\_\_

Previous Marriages: Y/N      If yes, complete the following:

Name(s) of Previous Spouse(s): \_\_\_\_\_

Date(s) of Marriage(s)/ Divorce(s): \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_      Age: \_\_\_\_\_

Current Employment: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Work Number: \_\_\_\_\_ Years Employed: \_\_\_\_\_

**2. Personal References**

**Please list 3 Personal References Below. The References cannot be related to you or your spouse.**

Parent A:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Parent B:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

### 3. Work References

**Please list 2 Work References Below. The references cannot be related to your or your spouse.**

Parent A:

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Parent B:

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number (with area code): \_\_\_\_\_

We, \_\_\_\_\_ and \_\_\_\_\_ give permission to Project Home Foundation to perform a background check with the information that we have provided.

We also acknowledge that should we be accepted as House Parents; we will enter a one year binding agreement. During that year, we understand that housing, utilities, food, and a monthly stipend will be provided. In return for those benefits, we will serve as parents to the residents of Project Home Foundation helping them to facilitate their personal journey through the opportunities offered by the program. Our first commitment above all other obligations is to the students and we will serve them to best of our ability giving them the support they need to meet their personal educational goals and plans thereafter.

\_\_\_\_\_  
Parent A Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent B Signature

\_\_\_\_\_  
Date