

Shunyi Outreach Foster Program

顺义家庭寄养项目

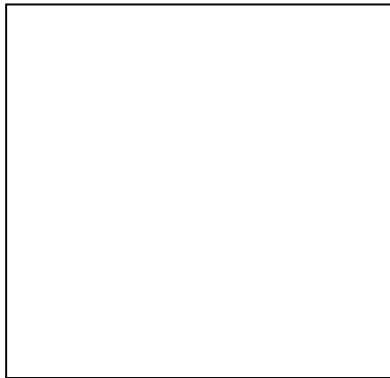


Photo of Child 孩子照片

Name:.....

姓名:

Date of Birth:.....

出生日期:

Name of Foster Parents:

寄养父母亲姓名

Father.....

父亲:

Mother:.....

母亲

Address:.....

家庭住址:

Phone Number:.....

电话号码

People to contact in case of emergency (紧急情况联系人):

Marsha (马雪萍) : 13910951014, 83660136

Linda (刘国兰) : 80221304

Hope Foster Home (希望之家) : 61424176

Information for Foster Parents

寄养家庭须知

- 1) Parents are responsible to care for the children as if they are your own children.
寄养家庭负责象亲生孩子一样来照顾寄养的孩子。
- 2) Parents must bring the child in for regular immunizations.
寄养家庭在指定日期带孩子到希望之家打防疫疫苗。
- 3) If your child is on regular medical treatment you should bring the child to the Hope Foster Home according to the doctor's instructions.
如果您照顾的孩子需要定期的医疗检查，请按照医生的吩咐按时带孩子到希望之家。
- 4) Regular home visits, without prior notice will be done at your home to check on the condition of your child.
我们将进行不定期的，随意的家访，以了解孩子在您家的生活情况。
- 5) You must contact the Hope Foster home staff immediately if you are having any problems.
如果发生任何的紧急情况，请立即与希望之家工作人员联络。
- 6) You are expected to attend all training sessions at the Hope Foster Home when these are scheduled.
寄养家庭必须保证可以参加希望之家举办的培训会。
- 7) If the child is away from your home for more than a month e.g. having medical treatment overseas, you will not be given funds for that time.
在寄养期间，如果孩子因特殊原因离开您家 1 个月以上，如去国外就医等情况。希望之家将不给支付本月的工资。

Items on loan to Foster Parents

寄养家庭暂借物品清单

These items are on loan to you reasonable care must be taken of all items and any damage reported to the HFH staff during home visits.

以下物品属于临时借给寄养家庭，请保持物品的干净和完好无缺。如果物品有任何的损坏，请在希望之家工作人员家方时，及时告知我们的工作人员。

If any of these items are missing, the foster patents are responsible to reimburse the Hope Foster Home. 如果以下物品丢失，寄养家庭负责赔偿。

Item 物品名称	Condition 物品情况	Date Supplied 支取 日期
1 Crib (婴儿床)		
1 mattress (床电)		
1 mattress protector (床垫防尿垫子)		
2 blankets (被子)		
1 single stroller (小推车)		
1 bathtub (洗澡盆)		
Toys (玩具)		
1 walker or bouncer (摇椅或学步车)		
3 plastic pants (塑料裤头)		
2 bottles (奶瓶)		
1 bottle brush (奶瓶刷)		
1 plastic tray and disinfecting box (托盘和消毒盒子)		
1 diaper pail (尿布庄专用永桶)		

Parent's signature 寄养父母亲签字:.....

Date 日期:

Supplies of Disposable items 消耗品供给清单

<u>Item</u> 物品	<u>Amount</u> 数量	<u>Date/ Parent's Signature</u> 日期/接收人签名					
Baby shampoo 婴儿洗澡, 洗发液							
Baby lotion 婴儿润肤露							
Baby powder 爽身粉							
Diapers 纸尿裤							
Clothes 衣服							
Socks 袜子							

助养服务申请表

Application form for prospective foster families.

申请人姓名 Applicant's Names:

Father (男) _____

Mother (女) _____

申请人年龄 Age :

Father (男) _____ Mother (女) _____

文化 Level of Education:

Father (男) _____ Mother (女) _____

职业 Current occupation:

Father (男) _____ Mother (女) _____

申请人申请为助养家庭之动机

What is your reason for applying to be a foster family?

你愿意接受任何一个我们安排到你家的孩子吗?

Are you willing to accept any child placed in your care? _____

如果不愿意, 你对助养的孩子有什么要求?

If not, what are your preferences?

是否愿意助养有特殊需要的孩子?

Are you willing to take care of a special needs child? _____

申请人地址 Applicant's Address _____

电话 Tel: (Office 办公室) _____ (家 Home) _____

手机 Mobile: _____ E-mail: _____

申请人 Applicant's signature: _____ 日期 Date: ____年__月__日

Medical tests 体检:

乙肝两对半 Hepatitis B:

检验日期 Date of test:..... 检验结果 Result of test:.....

胸透 Chest X-ray:

检验日期 Date of test:..... 检验结果 Result of test:.....

助养家庭的要求

Requirements of a Foster Family

一、家庭成员身体健康，无传染病(有胸透、乙肝两对半的化验报告)。

The family members need to be in excellent health and have no infectious disease. (It is required that all family members have an X-ray and Hepatitis B test)

二、喜欢孩子，有爱心，家庭和睦，最好具有良好的育儿经验。

It is expected that the children be raised in a loving and secure family environment. Parents with child-rearing experience are preferred.

三、家庭经济条件较好，家庭住房宽敞明亮，联系方便。

Parents should be financially stable and have enough living space to care for the child and their home should be located at a convenient place to visit.

四、助养母的年龄不超过 55 岁，不低于 25 岁。

The foster mother's age should be between 25 to 55 years old.

五、家庭成员中没有 7 岁以下的孩子。

A family with children over the age of seven is preferred.

六、助养父母无赌博，酗酒等不良嗜好。

The family should have no bad habits such as gambling or drinking.

七、家庭成员无犯罪记录。

Family members should have no criminal records.

家访报告 Initial Home Assessment

1. 申请人家庭状况 Applicant's family information

住在家里成员的详细情况 Details of people currently living in the home:

Name 姓名	Relationship 关系	Age 年龄	Occupation 职业	Income 收入
				Total 合计:

家庭月开销 Family's monthly expenses:

Item 用途	Expenses 费用
	Total 合计:

2. 家庭成员对助养的态度 Family members attitude towards foster care:

3. 家庭成员与成员间之关系 Any problems between the family members:

4. 申请人照顾正常/残疾孩子经验 Past experiences with child rearing, for healthy or special needs children:

5. 申请人对院方指导与培训的态度 Applicant's attitude towards training and instructions:

居住环境概况 Living environment information:

1. 请形容家庭居住环境状况 Describe the living environment

房间 Rooms:

厨房 Kitchen:

洗手间 Bathroom:

2. 请形容孩子睡眠地方的安排 Describe the area where the child will sleep:

3. 请形容邻居环境情况 Describe the Neighborhood:

4. 家中有什么小动物 Any animals in the home:

5. 孩子玩耍地方 Describe the playing area:

6. 工作人员对申请人及家庭的印象及评估 Evaluation and impression:

助养协议书·

为了保证儿童能享受家庭生活，在家庭氛围中幸福健康的成长，_____儿童福利院授权_____基金会(甲方)作为以下儿童的临时监护人，代表定远市儿童福利院和助养家庭(乙方)达成以下协议：

一、甲.方同意将儿童(姓名_____出生)交给乙方照顾，乙方同意自__年__月__日起助养该儿童。

二、甲方每月只须付人民币400元作儿童的助养费用.这包括儿童奶粉及辅助食品,衣服,被褥、尿布等日常用品。

三、甲方每月至少进行一次家访,以了解儿童在助养家庭的生活情况.

四、为保障儿童得到合适健康的照顾，甲方有权查问助养费的用途，若甲方认为该儿童在乙方处没有得到合适的照顾，有权将此儿童另作安排,乙方不得以任何借口挽留孩子。

五、助养儿童一旦申报国际收养后,乙方不得领养该儿童。

六、儿童在乙方助养开始后，乙方因故需将该儿童转回甲方的。甲方不付此期间助养费；乙方因故不能继续助养，应提前一周以上告知甲方，以便甲方妥善安排。

七、甲方指定合肥市定远儿童医院为助养儿童医疗定点医院，医药费甲方负责;如有急诊，可到就近医院紧急处理，应及时通知甲方。

八、乙方应按儿童的发育需要,及时带助养儿童进行体检和预防接种等。

九、乙方必须服从甲方对该儿童的一切安排，乙方在接到甲方返回通知后，应在指定时间内送还儿童给甲方，该儿童返回甲方后即为甲乙双方助养协议终止.

十、乙方要保证该儿童的人身利益，不得将儿童转给非助养家庭成员照顾。

十一,助养协议自签订之日起生效，协议一式三份，甲方两份，乙方一份。

甲方代表(签字):

乙方(签字):

二〇〇四年五月十九日

Foster Care Agreement Between Foster Family and Children's Welfare Institute •

To ensure that an orphaned child enjoys a family environment and grows into a healthy and happy adult, _____ authorizes _____ (Party A) to be the temporary guardian of the following child. On behalf of the Children's Welfare Institute, LWB (Party A) and the foster family (Party B) agree on the following:

1. Party A agrees to put Orphaned child, Name: _____, Sex: _____, DOB: _____ under the Party B's care; Party B agrees to begin caring for this child on _____.
2. Party A will pay 400 RMB per month to Party B, which should pay for nursing, milk formula, baby food, clothes, bedding, diapers and other daily supplies which the child needs
3. Party A will make home visits at least once a month to the foster family to check on its progress and well being.
4. If Party A thinks the child is not getting proper care in the foster family, Party A has the right to make a different arrangement for the child. Party B will not have any right to hold on to the child.
5. Once the child is selected for international adoption, Party B is no longer eligible to adopt this child.
6. At commencement of foster care, if party B finds themselves unable to continue this responsibility and needs to return this child to Party A, Party B should give Party A at least one weeks notice. If no notice is given, the monthly stipend will not be paid to Party B.
7. Party A appoints _____ as the hospital to use for the child in case of sickness. Party A will be responsible for the medical expenses. For any emergencies, Party B can put the child into the nearest hospital and inform Party A as soon as possible.
8. Party B should take the child to get to be vaccinated and to receive regular physical check ups according to the growth and age of the child.
9. Party B should abide by the arrangement which Party A makes for the child. If the child is required to be returned by Party A, Party B should respond accordingly. This means the end of the foster care agreement between Party A and Part B.
10. To ensure the safety of the child, Party B should not let non-relatives or anyone not recognized as part of the fostering family to take care of the child.
11. This agreement will take effect on the date of signing this agreement, Party A will hold 2 copies and Party B will hold 1 copy.

Party A (signature):
Date:

Party B (signature):
Date: