**Out of the Boat Kinship Ministry**

**Resource Application**

**\*All completed applications can be emailed to: sofomaloganoh@gmail.com\***

Guardian Name(s):

Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address (optional)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What other forms of assistance do you or the children receive? (i.e. utility, cash assistance from JFS, WIC, food assistance benefits, etc.)

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Do you regularly attend a local church? If yes, where?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the relationship status of the children placed in your care?

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When were the children placed in your care? (approximate month and year) \_\_\_\_\_\_\_\_\_

Anticipated length of kinship care?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are the biological parents of the children in your custody residing in your household?

Please list the children in kinship custody with you (exclude biological/adopted children):

Name Age School

To help us better understand the needs of kinship families in our community, and hopefully expand in the future, we would like to know the following information. It is optional and will not affect the status of your application.

Why were the children placed in your kinship care? Please circle.

Substance Abuse

Neglect or abandonment

Death of a parent

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Some of us in this ministry have experienced kinship care first hand. We would like the opportunity to pray for your needs and hear your additional concerns. Would you be ok with us following up with you in one week by phone or email to see if there are additional emergency needs or prayer requests? Yes or No

Please list any prayer requests or emergency needs (optional):

**Local Churches**

Antioch Alliance Church 740-385-3005

Cornerstone Baptist Church 740-385-9080

Ebenezer Baptist Church 740-385-8411

First Baptist Church 740-385-7520

First Church of Christ 740-385-7205

Hocking Hills United Methodist 740-385-4136

Kline Memorial 740-385-9020

Logan Church of the Nazarene 740-385-5360

Shepherd of the Valley 740-385-5166

Shepherd of the Hills 740-385-6118

The People’s Church 740-385-3368

Union Furnace United Methodist 740-385-7031