

BACKGROUND QUESTIONNAIRE

Pursuant to both state and federal law, American Indian Family and Children Services (AIFACS) does not discriminate with regard to any potential foster care applicant on the basis of race or religion. As such, any qualified applicant, regardless of race or religion, is eligible for licensing through AIFACS.

For individuals who are unfamiliar with AIFACS' history, AIFACS was created, as set forth in its original By-Laws, to create a foster care licensing agency whose goal and purpose is to provide culturally appropriate and relevant foster care for Native-American foster children. This was AIFACS' original goal and continues to be AIFACS' purpose and goal today. Any applicant who wishes to be licensed by AIFACS should understand this as they consider whether AIFACS will be a good foster care licensing agency for them.

With regards to this questionnaire, its purpose is to gather voluntarily provided background information regarding the foster parents who are licensed by AIFACS to potential placing agencies, as those agencies consider placing foster care children with AIFACS' foster care parents. Since this information is only being gathered on a voluntary basis any individual who does not wish to provide any of the requested information, for any reason, does not need to and that decision will not affect their eligibility for licensing with AIFACS in any way.

1. Please indicate which of the following you self-identify as:

African American _____ Asian American _____ Native American _____
Hispanic _____ Caucasian _____ Other _____

2. If you self-identify as Native-American, please indicate which of the following you identify yourself as:

- A. A member of a federally recognized tribe: **Yes** **No**

If so please indicate which federally recognized tribe you are enrolled in and your enrollment number:

- B. You are eligible for enrollment in a federally recognized tribe but not currently enrolled: **Yes** **No**

If so, please indicate which tribe you are eligible for enrollment in:

- C. You are not eligible for enrollment in a federally recognized tribe but you identify yourself as Native American: **Yes** **No**

If so, please indicate why: _____

- D. You prefer not to answer: _____

Signature

Date