Adoption Home Study Application

Please complete all fields as thoroughly as possible. If a question does not apply, write 'N/A'.

Applicant Information

Applicant #1:

Full Name: _____

Email Address: _____

Phone Number: _____ Date of Birth: _____

Marital Status: [ ] Married [ ] Divorced [ ] Single [ ] Unmarried Couple

Date of Marriage (if applicable): _____

Length of Relationship: _____ Years, _____Months

Applicant #2:

Full Name: _____

Email Address: _____

Phone Number: _____ Date of Birth: _____

Marital Status: [ ] Married [ ] Divorced [ ] Single [ ] Unmarried Couple

Household Information

Address:

Street Address: _____

City, State, ZIP: _____

Length of Time at This Location: _____ Years & _____ Months

Length of Time in Tennessee: _____ Years & _____ Months

Property Status: [ ] Own / Mortgaged [ ] Rent [ ] Rent Free

Our Home is located in: Eastern Standard Time Zone (EST) _____ Central Standard Time Zone (CST) _____

Household Members

List all individuals living in the home:

Name | Age | Relationship to Applicant(s)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Employment & Income

Applicant 1 Employer: _____

Job Title: _____

Field of Work: _____

Annual Income: $_____ Typical Work Schedule: _____

Applicant 2 Employer (if applicable): _____

Job Title: _____

Field of Work: _____

Annual Income: $_____ Typical Work Schedule: _____

Adoption Preferences

Type of Adoption (check all that apply):

[ ] Infant [ ] Toddler [ ] Young Child [ ] Teen [ ] Foster [ ] Private [ ] Other: _____

Preferred Age Range: _____

Gender Preference: _____

Willing to adopt siblings? [ ] Yes [ ] No

Willing to adopt a child with special needs? [ ] Yes [ ] No

If yes, please specify types of special needs you are open to: _____
_____

Background

Have you or anyone in your household been convicted of a crime?

[ ] Yes [ ] No If yes, explain: _____
_____
_____

Have you previously completed a home study?

[ ] Yes [ ] No If yes, when and with which agency: _____
_____
_____

Declaration & Signature

I/We hereby declare that all information provided in this application is true, accurate, and complete to the best of my/our knowledge. I/We understand that any omission, misrepresentation, or falsification of information—whether intentional or unintentional—may result in the suspension or denial of this application, or the termination of services.

I/We acknowledge that completion of this application does not guarantee approval of a home study or placement of a child. I/We understand that Tennessee Adoption Home Study Services, LLC reserves the right to verify all information provided and to conduct background checks and other necessary screenings as part of the home study process.

By signing below, I/we affirm that:

- I/We have answered all questions honestly and to the best of our ability.
- I/We consent to the verification of the information provided.
- I/We understand and accept the terms, conditions, and limitations associated with this application and the home study process.

Signature of Applicant 1: _____ Date: _____

Signature of Applicant 2: _____ Date: _____