



## ADOPTION GRANT APPLICATION CHECKLIST

1. One page cover letter – Please include the following information:
  - What has led you to pursue adoption
  - How a grant from FBC Livingston Adoption Fund will impact your adoption process
  - Evidence of your faith in Christ
  - Any other information that you would like the grant committee to take into consideration
2. Completed Grant Application
3. A copy of your completed and approved home study
4. A copy of most recent tax return, Form 1040
5. Copy of one month's worth of paystubs/proof of income for all income earners
6. A pastoral letter of recommendation, including information about attendance, tithing, and service to the Kingdom.
7. A photograph and information for an accepted referred child, if applicable.

***\*Please submit all documents at one time in one envelope***

Please mail application packet to:

FBC Livingston  
Attn: Adoption Fund  
106 Colt Road  
Livingston, TX 77351



# ADOPTION GRANT APPLICATION

## I. GENERAL INFORMATION

Please provide your contact information:

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

Spouse Name \_\_\_\_\_ Grant Application Date (Today's Date) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Number of dependent children in your immediate family? \_\_\_\_\_

Are you adopting through an official 501(c)(3) placement agency?    Yes    No    (circle one)

Date home study was satisfactorily completed \_\_\_\_\_

## II. EMPLOYMENT INFORMATION

Name of Organization \_\_\_\_\_ Position \_\_\_\_\_

Work Phone \_\_\_\_\_

Does your organization have adoption benefits?    Yes    No    (circle one)

Spouse's Occupation \_\_\_\_\_

### III. CHURCH INFORMATION

Name of Church \_\_\_\_\_

Church Address \_\_\_\_\_

Church City \_\_\_\_\_ Church State \_\_\_\_\_ Church Zip Code \_\_\_\_\_

Church Country \_\_\_\_\_ Church Phone \_\_\_\_\_

Church Website \_\_\_\_\_ Sr. Pastor's Name \_\_\_\_\_

Does this church currently have an adoption ministry?    Yes    No    (circle one)

Do you belong to a small group at your church?    Yes    No    (circle one)

Do you volunteer at this church?    Yes    No    (circle one)

### IV. FINANCIAL INFORMATION

What were your earnings (wages, salaries, tips, combat pay, etc) in the last year? \_\_\_\_\_

What were your spouse's earnings (wages, salaries, tips, combat pay, etc) in the last year? \_\_\_\_\_

Most current combined Adjusted Gross Income \_\_\_\_\_

Previous year's combined Adjusted Gross Income \_\_\_\_\_

What is your (and your spouse's) total current balance of cash, savings, and checking accounts?

\_\_\_\_\_

What is the net worth of your (and your spouse's) investments, including real estate (not your home)?

\_\_\_\_\_ *(net worth = current value - debt owed)*

What is the fair market value of your home? \_\_\_\_\_

What is your home equity? \_\_\_\_\_

What is the net worth of your deferred assets (retirement, IRA's, etc)? \_\_\_\_\_

What is the net worth of your non-deferred assets (cash, bonds, stocks, etc)? \_\_\_\_\_

What is the net worth of your (and spouse's) current business and/or investment farms? \_\_\_\_\_

Approximately how much consumer debt (credit card, car/boat loans, etc) do you carry monthly?

\_\_\_\_\_

What is the annual amount of your earned income credit from IRS form 1040? \_\_\_\_\_

What is the annual amount of any additional child tax credit from IRS form 1040? \_\_\_\_\_

What is the annual amount of child support you receive for all children (do not include foster care or adoption payments), for the most current year? \_\_\_\_\_

What is the annual amount of child support you paid because of a divorce or separation or as a result of a legal requirement, for the the most current year? \_\_\_\_\_

What is the annual amount of housing, food and other living allowances paid to members of the military, clergy and others (including cash payements and cash value of benefits), for the most current year? \_\_\_\_\_

How much do you give annually to non-profit organizations? \_\_\_\_\_

Do you rent your living space? \_\_\_\_\_

Comments/Special financial circumstances to be considered \_\_\_\_\_

\_\_\_\_\_

What is your estimated total adoption expense? \_\_\_\_\_

What is your remaining balance? \_\_\_\_\_

Have you received/do you expect to receive any additional funds in the form of gifts or grants?

(please explain) \_\_\_\_\_

## V. AGENCY AND ADOPTEE INFORMATION

Adoption Agency Name \_\_\_\_\_

Agency Address \_\_\_\_\_

Agency City \_\_\_\_\_ Agency State \_\_\_\_\_ Agency Zip Code \_\_\_\_\_

Agency Phone \_\_\_\_\_

Caseworker's Name \_\_\_\_\_ Caseworker's Business Phone \_\_\_\_\_

Caseworker's Email Address \_\_\_\_\_

*We realize that you may not yet have answers to the following questions. If you do not yet know an answer, simply leave the field blank – this will not impact your application. However, we ask that you do fill in the final box below to provide us with some information about your inspiration for adopting.*

Adoptee's First Name \_\_\_\_\_ Adoptee's Last Name \_\_\_\_\_

Adoptee's Birthdate \_\_\_\_\_ Adoptee's Country of Origin \_\_\_\_\_

Expected Placement Date \_\_\_\_\_

**Additional Information:**

Are there any additional needs/special considerations? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## VI. PHOTO & VIDEO CONSENT

Would you consent to sending a family photo after adoption is completed? Yes No (circle one)

Would you consider being interviewed for a video testimony after adoption? Yes No (circle one)