Foster Caregiver Progress Form

Your First and Last Name(s):

First and Last Name of the Child:

Instructions: This form gives you the opportunity to provide valuable information about how the child in your care is doing and exercise your legal right to be heard in court. You are encouraged to complete and submit this form to your DCFS case worker before the child's next court hearing. Please type or write clearly in ink and complete a separate form for each child. Provide any current information you consider relevant since the child was placed in your care. You may write on the back of this form if needed. DCFS will submit the form to the court and make sure all parties involved in this case get a copy of the form.

(1) How is the child doing in your home (strengths and weaknesses)?

(2) What strengths, interests, hobbies, or talents does the child have, and activities or sports does he/she participate in or want to participate in? What help is needed to support these?

(3) Please list any medical, dental, mental health, or developmental progress or challenges:

(4) Please list any childcare or educational successes or challenges:

(5) Do you have any feedback about the child's visits with parents (i.e., transportation, schedule, behaviors of the child that you observed)?

(6) Is information about the child being shared being medical appointments, school functions, and No Yes.	between you and the child's parent(s) (i.e., d/or other activities the child is involved in)?
If no, why?	
(7) Do you have any of the child's siblings in you visitation is going.	ur home? If not, briefly describe how sibling
(8) Is there any information or resources that yo	u need to better care for the child?
GIGNATURE(S) OF FOSTER CAREGIVER(S) WHO COMP ORM	PLETED DATE SIGNED
FOR OFFICIAL	USE ONLY
t and Last Name and Title of Recipient of Form:	Date Form Received:
ne of Court:	Docket Number:

Court Date:

Name of Judge: