



# Individual / Family Information Form

**All information is confidential.** Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_

School (if applicable): \_\_\_\_\_

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ Postal Code: \_\_\_\_\_

Closest Major Intersection: \_\_\_\_\_

Phone Numbers	Name	_____	_____
	Home	( ) _____	( ) _____
	Business	( ) _____	( ) _____
	Email	_____	_____

What does your son or daughter enjoy doing? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What connections does your son or daughter have in his/her community or neighbourhood currently? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In order for us to co-ordinate effective support for your child, please list any other organizations with which you are involved. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What community/neighbourhood connections would you like Extend-A-Family to help you develop? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the primary language and method of communication used by your son or daughter? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any religious or cultural considerations? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

With what activities does your son or daughter need assistance? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any health/diet/allergy considerations? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there any other information that you wish to share? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list all other people living in your home.

Name	Year of birth (if under 18)
_____	_____
_____	_____
_____	_____
_____	_____

In consideration for those who may be meeting with you in your home, we are asking:

Does anyone in your home smoke? \_\_\_\_\_ Do you have any pets? \_\_\_\_\_

How did you learn about Extend-A-Family? \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian(s)

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

**Criminal Reference Checks** are required for everyone 18 years of age and over living in your home. Forms will be provided.