

Waterford Country School Foster Care Program Financial Statement

Family Name:		Date:	
Income Information			
Parent One:		Parent Two:	
Salary per___:		Salary per___:	
Other income:		Other income:	
Other income:		Other income:	
Total Monthly Household Income:			

Monthly Expenses			
Type	Amount		
1. Mortgage/ Rent:			
2. Utilities:	Gas:	Electric:	Heat:
	Phone:	Cable:	Internet:
3. Monthly Groceries:			
4. Credit Cards:			
5. Loans (car, equity, school, etc):			
6. Insurance:	Medical:	Car:	Home:
7. Child support:			
8. Other expenses:			
Total Monthly Expenses:			
Monthly Income Minus Expenses:			

Insurance Information	
Health Insurance Carrier Parent 1:	
Health Insurance Carrier Parent 2:	
Car Insurance Carrier:	Coverage Amounts:
Homeowners/Renters Insurance Carrier:	

Have you filed or planning for bankruptcy, foreclosure or serious financial crisis? Yes No

I/We understand that a foster child's board check will arrive up to six weeks after placement.

I/We can support the child during that time period. Yes No

I certify that the above statements made by me are complete and true to the best of my knowledge.

Parent One

Date

Parent Two

Date