

Preliminary Adoption Assessment Document

Agency Information

Agency Name

Date

Caseworker Name

Contact Details

Applicant(s) Details

Applicant 1 Name

Applicant 2 Name (if applicable)

Address

Phone

Email

Home Environment

Brief Description

Other Occupants

Applicant Motivation & Readiness

Motivation for Adoption

Preparation and Expectations

Assessment Summary

Caseworker Observations

Risk Factors / Concerns

Recommendations

Sign-Off

Caseworker Signature

Date