



# Child Respite Care Information

## Things To Know About Me!

Name/Age/Birthdate: \_\_\_\_\_

Where am I from? \_\_\_\_\_

Some things I like? \_\_\_\_\_

Things I do NOT like!: \_\_\_\_\_

Foods I can't have: \_\_\_\_\_

What time do I get up? \_\_\_\_\_

What time do I go to bed? \_\_\_\_\_

Do I take a nap? \_\_\_\_\_

Do I have any special routines? \_\_\_\_\_

Other questions that might be relevant:

- Is there anything I'm afraid of that you need to know about?
- Is there anything I do that the respite parents might not understand/know about me that they need to know?
- Do I have siblings that aren't with me in foster care? And if so, am I allowed to call them?
- Do I have regular visitation with my family? Are we supposed to call them while I'm in respite?

Foster Mom's Cell #: \_\_\_\_\_

Foster Dad's Cell #: \_\_\_\_\_

Name of Case Worker/Consultant: \_\_\_\_\_

Cell # of Case Worker/Consultant: \_\_\_\_\_

Doctor's #: \_\_\_\_\_

Name of School: \_\_\_\_\_

Medicaid #: \_\_\_\_\_