

# Resource Parent(s)/Adoptive Parent(s) of the Year Nomination Form



Please choose one:

\_\_\_ Resource Parent(s)      \_\_\_ Adoptive Parent(s)

### Criteria:

Resource Parent(s): must be an approved resource parent(s), have meet the annual training requirements, work well in partnership with the department and other resource parents, be advocates for the children they serve, fulfill DCS expectations, and be a member of TFACA.

Adoptive Parent(s): must have adopted through the child welfare system and be a member of TFACA.

Please complete the following:

Your name and contact information: \_\_\_\_\_

Nominee Information:

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ County: \_\_\_\_\_ Region: \_\_\_\_\_

What types of children served/adopted? (sibling groups, medically fragile, teenagers, special needs, etc.) \_\_\_\_\_

Number of children currently placed: \_\_\_\_\_ Names and ages: \_\_\_\_\_

If resource parent, have they adopted? \_\_\_\_\_ If yes, names and ages: \_\_\_\_\_

What makes this person/couple stand above the rest in providing excellence in service to the children in their home? Add additional pages as needed. \_\_\_\_\_

Send nominations to Chairman, Cindy Hogan, at [becometheanswer@gmail.com](mailto:becometheanswer@gmail.com) or to the address below. **Deadline: August 14, 2015**



Tennessee Foster Adoptive Care Association  
PO Box 332428  
Murfreesboro, TN 37133