YOUTH & FAMILY SERVICES and RAINBOW FAMILY SERVICES

YFS – Salem Office	RFS – McMinnville Office
2933 Center Street NE – Salem, OR 97301 Heidi Frederick – 503-362-2225 x-311 Tena Northern – 503-362-2225 x-310	800 Second Street NE McMinnville, OR 97128 503-472-2240

TREATMENT FOSTER PARENT APPLICATION PACKET

TFP Application (5-page tan document)

Please complete thoroughly, including full information on prior work experience, references (include full names, addresses & phone numbers) and other requested information.

Foster Home Certificate Application (one-page blue document)

Please complete fully the front page of this document and those areas not crossed out on the backside. This is the document for the State of Oregon.

TFP Home Study Biography

This is an extremely important document to be completed thoroughly and thoughtfully. Please – no one sentence answers. Take this opportunity to help our agency personnel get to know you much better and why you have made the decision to provide care to youth – perhaps based a great deal on your own experiences. There is a form to complete this by handwriting – or using a computer word processor. Please advise the TFP Certifier of your choice.

Authorization for Release of Confidential Information (gray form)

This form allows the TFP Certifier and other YFS / RFS personnel to contact employers, personal references and others you indicate who will be able to discuss your abilities to provide care to program youth. It also allows for OYA or DHS to conduct a search for any criminal background, referrals to a care-giving agency and to assign a provider number for each TFP home.

Physician's Letter & Certificate of Competency (2 page with letter & certificate)

This certificate must be completed & signed by a physician to validate competency to perform TFP responsibilities. A physical is not necessary. Usually the TFP's personal physician will sign with a request in person or through other written correspondence. The TFP may either provide this to the TFP Certifier at the YFS / RFS office, or have the physician mail or FAX it directly.

Criminal History Check Denial List

DHS Criminal Record Check – Form 301 CP

This is a two-page document – the application completing the following numbers: #8 – name, DOB, SSN. The applicant must complete all of page two – do not leave anything out if applicable - #15 - #26; Sign #27 and date #28. This needs to be turned in with the DHS fingerprint card after completed by OSP or police agency.

Criminal Background Check Form (triplicate document) for TFP & Bio Children

Complete this form thoroughly to avoid having to duplicate the process. Provide all first and last names used (single, married, etc.) as well as other states that you have resided. This needs to be turned in with the fingerprint forms to be processed appropriately. If you indicate that you have any type of criminal history, you must submit a letter of explanation. Please be very thorough with the explanation, as this often times will determine if this is approved through the State of Oregon officials. All biological children of the TFP applicant(s) ages 12 and above must complete the "OYA Foster Care Program – Household & Non-Foster Care Consent for Criminal Record Check".

Fingerprint Forms - One for OYA and One for DHS

Please refer to the attached letters for full explanation of this process and reimbursement provided you if there is a cost to you from the police agency you choose.

This must accompany the "Criminal Background Check Forms" mentioned above.