

GUARDIANSHIP BACKGROUND SHEET
PLEASE ANSWER ALL QUESTIONS – LEAVE NO BLANKS
DATE _____

If Guardian is not a parent, what is the relationship to minor child? _____
Have you applied to the Family Court for the Kinship Guardianship? _____ When appointed _____
What type of assistance do you receive from this program? _____
Guardian contact Phone number _____

EMPLOYMENT (copy of last paystubs is needed) DO NOT PUT YOUR NAME & HOME ADDRESS

Place of Employment for mother _____
Address _____
Telephone No. _____ How long at this place of employment _____
Salary: Bi-Weekly Gross (before Taxes)\$ _____ Net Pay (take home) \$ _____

Place of Employment for father _____
Address _____
Telephone No. _____ How long at this place of employment _____
Salary: Bi-Weekly Gross (before Taxes)\$ _____ Net Pay (take home) \$ _____

Place of Employment for Step-Parent (residing in the home with minor) _____
Address _____
Telephone No. _____ How long at this place of employment _____
Salary: Bi-Weekly Gross (before Taxes)\$ _____ Net Pay (take home) \$ _____

HOUSEHOLD

How many adults (include yourself & anyone over 18 years old) in home? _____
How many minor children (include minor & anyone under 18 years old) in home? _____ ages _____

INCOME

Do you receive assistance from Welfare/Social Services? How much monthly? \$ _____
Food Stamps? \$ _____
Do you or anyone in the home receive Medicaid, Medicare or NJ Family Care? Who? _____

Do you receive Child support for any of the child(ren) in the home? _____
\$ _____ per week for who? _____

Does anyone in the home receive Social Security Benefits? _____
\$ _____ per month for who? _____ what kind? _____
\$ _____ per month for who? _____ what kind? _____

Does anyone in the home receive Unemployment/Disability Benefits? _____
\$ _____ Per week for who? _____

Is there any other income in your household other than what is provided above? _____