



ADOPTION ASSISTANCE APPLICATION

RELATIVE/FRIEND REFERENCE

Thank you for taking the time to complete this reference form on behalf of the family. We understand that you may not know all the details of the family's life but we ask you to be as truthful as possible.

Name of Adopting Family:

Date:

Your Full Name:

Phone:

Relationship to the Family:

Can we add you to our monthly email newsletter?

Email:

How long have you known this family?

How would you describe this family?

From your observation, describe their parenting style and skills:

Do you have any concerns about them as parents?

Please add any additional comments or concerns:

Send the complete reference to Lifesong Canada by **email** (adoption@lifesongcanada.org) or by **mail**:

Attn: Adoption Assistance Program
867558 Township Rd. 10, Bright, ON, N0J 1B0