

Hope 4 One Ministries

Adoption Grant Application

Please note that this application must be filled in completely. Please do not leave a question blank, as the application will then be considered incomplete.

Also include the following:

- A photocopy of your completed home study
- A photocopy of your most recent Federal Tax Return (1040 form) *please mark out the social security numbers on all pages.*
- A letter of personal reference from a pastor, elder, or small group leader at your church
- A current photo of your family
- If you have a photo of the child which you desire to adopt, we would love for you to share a copy with us. Please note that this is not required.
- Please mail COMPLETED application to: 2400 Georgetown Rd NW Cleveland, TN 37311

Husband's Full Name:		Husband's Date of Birth://
Wife's Full Name:		
Street Address:		
City:	State:	
Zip Code:		
Phone Number:		
Other Cell Number:		
Email Address:		
Husband's Employer:		
Length of employment:		
Wife's Employer:		_
Length of employment:		

Have you ever adopted before? O yes O no

If yes, name/ages of adopted child/children:			
Is anyone in your immediate family adopted or connected with adoption in any way? If yes, please explain.			
, 			
Do you have other biological or adopted children? If so, please list name and ages.			
, 			
Do you have a child already identified for this adoption? O yes O no If yes, please tell us, briefly, about this child AND where you are currently in the adoption process.			
			
Do you plan on adopting a child with special needs? O yes O no If yes, please briefly tell us about the special needs of the child that you are adopting.			
Do you plan to adopt an older child(over age 5)? O yes O no			
Are you pursuing a domestic or international adoption? If international, please list country:			
Are you a member of a church?			
If yes, please list church name and denomination:			
Please provide contact information for your pastor, elder, or similar overseer at your church.			
On the lines below (or as an attachment), please share with us how God led you to pursue adoption.			

ADOPTION COSTS
Please list the estimated adoption cost for your adoption. If unknown, you should be able to receive this
information from your adoption agency: \$
,
Are you applying for any other grants, loans, or financial assistance? If yes, please explain and give amounts.
Have received any grants thus far for this adoption? If yes, please give amounts.
Please indicate how much money is still needed to fund your adoption.
What were your earnings in the past two years? Please list each year separately.
Year:
Husband:\$
Wife:\$
Wiie.γ
Year:
Husband:\$
Wife:\$
What are your projected earnings for the current year?
Disconsideration of the second design of the second
Please list the current total balance of your savings and checking accounts:
Savings: \$
Checking:\$
When do you anticipate your adoption being finalized?
Where are you currently in the adoption process?
What agency are you using for this adoption?
Who is your point of contact at the agency?
Please provide the mailing address for your agency:

Any additional information that you would like to share with us:				
(Please use space on back or attach a se				
How did you hear about Hope 4 One?				
-	rmation to Hope4One for their internal and confidential use. Al is accurate to the best of our knowledge.	i l		
information contained in this application	is accurate to the best of our knowledge.			
Adoptive Father:				
PRINT NAME:				
Adoptive Mother:				
PRINT NAME:	Date:			
and publish photographic portraits or pi including but not limited to print media social media, advertisements, and publi name in connection with any such use i and all claims and demands that may ar	I(ren), hereby grant Hope4One the right and permission to take ctures of me and/or my child(ren) through or on any medium and distribution over the internet for publications, displays, we ity/promotions/campaigns, without notifying me; and to use me Hope4One so chooses. I release and discharge Hope4One from se out of or inconnection with the use of the photographs. This he benefit of the board members, legal representatives, license	ebsites, ly n any		
Adoptive Father Signature:				
Adoptive Mother Signature:				
Print Names:				
Date:				