



**HOW THE CHILD DESCRIBES HIM/HERSELF**

Provide us with information directly from the youth about his or her personality, likes, interests, aspirations and dreams. (Or attach "What I Want People to Know About Me" form.) If the youth is not able to provide input, please indicate why.

**CURRENT CAREGIVER/OTHER ADULT INPUT**

Please provide us some information from another adult in the child's life (foster parent, therapist, residential staff member, mentor, etc.) or attach the "What Others Say" form. Describe the child's interaction and behavior in the family or residential setting. (What does this child respond best to in the home and community? What helps him or her do well?)

**CHILD'S HEALTH & DEVELOPMENTAL STATUS**

For each area of impairment, circle the level of impairment, list specific diagnosis, if any, and, describe how daily functioning is impacted. If the child has a specific diagnosis, please describe how this affects this specific child (including types of behaviors that are as a result of the diagnosis and what the child responds best to). For guidance on impairment levels, please visit the MARE website.

**Physical/Medical Issues:**                     None                     Mild                     Moderate                     Severe

**Emotional/Behavioral Issues:**                     None                     Mild                     Moderate                     Severe

**Developmental/Cognitive Issues:**                     None                     Mild                     Moderate                     Severe

Is this child expected to function independently as an adult?    Yes    No    May Need Assistance

**EDUCATION/LEARNING LEVEL**

Grade: U   N   P   K   1   2   3   4   5   6   7   8   9   10   11   12  
(U = ungraded   N = Not in school   P = Preschool)

**Educational/Learning Impairment Level:**  None                     Mild                     Moderate                     Severe

Diagnosis and/or Special Education Certification: \_\_\_\_\_

Describe child's academic functioning, behavior in classroom, peer relations and school likes and dislikes. Also include educational achievements, awards, advanced programs, etc.:

**QUALITIES/SKILLS OF ADOPTIVE FAMILY**

Briefly describe the qualities that would be important for a potential adoptive family to demonstrate in order to appropriately address the needs of this particular child. Include other factors to be considered (such as visitations or contact with family members, siblings or foster parents and where those people live, therapeutic services, completion of residential treatment program, etc.) in placement decisions that would best meet this child's needs.

**AGENCY/WORKER INFORMATION**

Agency responsible for MARE registration \_\_\_\_\_

Contact worker for inquiries \_\_\_\_\_ Phone No. \_\_\_\_\_ ext. \_\_\_\_\_ e-mail address \_\_\_\_\_

Contact worker's agency (if different) \_\_\_\_\_

Agency address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**OTHER DOCUMENTATION**

*REMEMBER: A child's registration is not complete until 1. a photo, 2. the Child-Specific Adoption Recruitment Plan, and 3. the Recruitment Booklet Signature page (for youth 9 and older) are received by the MARE office along with this form. If these required documents are not submitted with this form, the photolist registration is considered incomplete. Please note, the child's MARE registration date is not recorded until all required documents are received by the MARE office.*

**PHOTO INFORMATION:** *A clear, well-lit photo of the child or sibling group must be submitted along with this registration form. Digital images may be submitted to MARE via email at [Mark\\_fisk@judsoncenter.org](mailto:Mark_fisk@judsoncenter.org) and should have a resolution of at least 200 dpi. Photos printed on high-quality photo paper may be mailed to MARE at 3840 Packard Road, Suite 170 Ann Arbor, MI 48108.*

**Photos that are sent by fax, photocopied, or that are not printed on photo paper will not be accepted. Likewise, photos and digital images that are dark, blurry and/or taken by a camera phone will not be accepted.**

Please tell us when to expect the photo:

Photo Enclosed                       Photo sent via email                      Date MARE will receive photo \_\_\_\_\_

**CHILD-SPECIFIC RECRUITMENT PLAN INFORMATION:** *Please attach the Child-Specific Adoption Recruitment Plan using the MARE template, which can be found on [www.mare.org](http://www.mare.org). Recruitment plans may be submitted to MARE via fax at (734) 794-2962 or mail to MARE at 3840 Packard Road, Suite 170 Ann Arbor, MI 48108.*

Please tell us when to expect the recruitment plan:

Recruitment Plan Enclosed                       Recruitment Plan will be mailed or Faxed to the MARE office  
Date MARE will receive Recruitment Plan \_\_\_\_\_

Please tell us when to expect the recruitment consent form, if applicable:

Recruitment Consent signature page Enclosed                       Recruitment Consent signature page will be mailed or  
Faxed to the MARE office                      Date MARE will receive Recruitment consent \_\_\_\_\_

Signature of Registering Worker

Date