



Burkholder Family Foundation

Adoption Grant Program

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THE BURKHOLDER FAMILY
FOUNDATION

Grant Application Instructions

- Burkholder Family Foundation accepts applications after a home study has been completed and prior to your adoption being finalized.
- Provide a cover letter that describes the path you took to pursue adoption, the stage you have reached in your adoption and any other pertinent information regarding your motivation to adopt. Include information about your fundraising efforts, donations, help from extended family, and other grants you have applied for or received.

After the Application has been Completed

- Once the application is complete, you may be contacted for additional information prior to submission to our Board.
- If you have not been matched with a birth mother or child prior to applying, please notify us once you have been matched.
- Our process is ongoing, there are no application deadlines and applications are accepted and reviewed throughout the year.
- Under special circumstances Burkholder Family Foundation can expedite the grant review process if the adoption will be completed faster than anticipated.
- If there are any changes regarding your adoption, please notify the Foundation.

Notification

Once a decision is made regarding your application, applicants will receive notification by email or by phone. All decisions are final, and our process does not include reapplying if an application has been denied. Since the circumstances of each adoption vary, the release of funds may be different for each applicant.

After you are Home

Burkholder Family Foundation requests a brief summary of your adoption and pictures after your child is home. If the family gives written consent, Burkholder Family Foundation may use your pictures and adoption summary, without identifying information, such as last names, on our web site or in printed material.

Burkholder Family Foundation Grant Application

Grant Program Documents Checklist

Family Name: _____ Date: _____

Please use this checklist to confirm you have included all necessary documents. *If you haven't been matched you may still apply*, and we will wait to submit your application to the Board until after we receive the picture and medical of your child.

√	Burkholder Family Foundation Forms
	Grant Application - Family/Adoption Information
	Financial Statement
	Monthly Budget Form
	Adoption Expense Form
	Grants, Fundraising and Donations Form
	Consent Form

Supporting Documents/Other

	Home study
	Cover letter - See instructions to be sure your cover letter includes the requested information.
	Most recent 1040 with attachments - include schedule C if business owner
	Most recent copy of pay stubs for all applicants
	Picture & medical of child being adopted - We can hold the application until this is available.
	Picture of current family

Burkholder Family Foundation - Grant Application

Family and Adoption Information

Adoptive Parent 1

Name: _____ Age: _____
Email: _____
Cell: _____ Text: Yes ___ No ___
Best # to be reached: Cell _____ Home _____
Address: _____
Home Phone: _____

Adoptive Parent 2

Name: _____ Age: _____
Email: _____
Cell: _____ Text: Yes ___ No ___
Best # to be reached: Cell _____ Home _____
Address: _____
Marital Status: Single ___ Married ___ Other _____

Current Family Profile

of Children: _____ Adopted: _____ Biological: _____ Foster: _____ Any children with special needs? Yes / No

If yes, please explain: _____

of Children living at home: _____ Name and ages: _____

Is the child or children being adopted currently living in your home? Yes/No If yes, how long? _____

Name and ages of any others residing in household: _____

Child and Travel Information

If child information is unknown, you may still apply and provide us with an update once you have been matched.

Is this an interstate adoption? Yes/No - If adoption related travel is required, please provide information below:

Expected Travel Date: _____ City/State: _____

Expected Length of Stay: _____ Family Members Traveling: _____

Child to be Adopted

Name	Age	Sex	Special Need

Adoption Professionals Information

Home Study Agency Name: _____ Contact Person: _____

Address: _____ Phone: _____

Adoption Agency Name: _____ Contact Person: _____

Address: _____ Phone: _____

Attorney/Law Office: _____ Contact Person: _____

Address: _____ Phone: _____

Matching/Consulting Service: _____ Contact Person: _____

Address: _____ Phone: _____

How did you hear about Burkholder Family Foundation?

Burkholder Family Foundation Grant Application

Financial Statement

Adoptive Parent 1

Name: _____
 Occupation: _____
 Employer: _____

Projected Income for Current Year:

Gross: _____ Net: _____
 Other Yearly Income: _____ Source: _____
 (Social security, disability, retirement, military,
 foster care/adoption stipends, etc.)

Adoptive Parent 2

Name: _____
 Occupation: _____
 Employer: _____

Projected Income for Current Year:

Gross: _____ Net: _____
 Other Yearly Income: _____ Source: _____
 (Social security, disability, retirement, military,
 foster care/adoption stipends, etc.)

Joint Assets and Liability Information

Assets - What I Own:

Home (current market value) _____
 2nd Home (current market value) _____
 Total Savings & Checking _____
 Stocks and Bonds _____
 401K/Retirement Accounts _____
 Other Assets (describe): _____

 Total of All I Own _____

Liabilities - What I Owe:

Mortgage on 1st Home _____
 Mortgage on 2nd Home _____
 Home Equity Loan/Credit _____
 Education Loans _____
 Credit Cards _____
 Other Liabilities (describe): _____

 Total of Liabilities _____
 Total of All I Own _____
 Total of Liabilities _____
 Total Net Worth _____

Can you borrow from your retirement for this adoption? Yes _____ No _____

Reason: _____

Can you borrow against your home for this adoption? Yes _____ No _____

Reason: _____

Will you receive any employer reimbursements before or after the adoption is complete?

Yes _____ No _____ Before _____ After _____ Amount: \$ _____

Burkholder Family Foundation Grant Application

Monthly Budget

Name: _____

Date: _____

Monthly Take Home - Income after Taxes

Adoptive Parent 1 _____
 Adoptive Parent 2 _____
 Child Support/Foster Care/Adoption Stipends _____
 Bonus _____
 Other (social security, disability, retirement, military, etc.) _____

1. Total Monthly Income \$ _____

Monthly Household Expenses:

Mortgage/Rent _____
 Home Equity Loan _____
 Utilities/Internet _____
 Insurance (house, life, medical, etc.) _____
 Groceries/Personal Care Items _____
 Medical/Prescription Expenses _____
 Clothing _____
 Parent/Child Educational Exp. _____
 Entertainment/Extracurricular _____
 Car Expenses/Auto Loan Payment _____
 Other _____
 Other _____

2. Total Expenses \$ _____

Loans and Credit Cards - Exclude Expenses Already Listed Above:

Name of Bank/Lender	Current Balance	Monthly Payment

3. Total Loans and Credit Cards \$ _____

4. Monthly Income (Enter amount from line 1) \$ _____

5. Grand Total Monthly Exp. (Add lines 2 & 3) \$ _____

6. Money Left After Paying Bills (Subtract line 5 from line 4) \$ _____

Burkholder Family Foundation Grant Application

Adoption Expenses

Family Name: _____

Date: _____

Type of Expense	Total Cost	Amount Paid
Fees Paid to Agency		
Fees Paid to Attorney		
Fees Paid to Matching Service		
Home Study/Updates and Preparation		
Birth Mother Expenses		
Birth Mother Attorney Fees		
Consultant Fees		
Adopted Child's Medical Exam/Medical Expenses		
Document Preparation Fees		
ICPC and/or Court Fees		
Post Placement Report Fees		
Attorney Fees - Finalization		
Other - Please Explain:		
Other:		
Other:		
Total Cost of Adoption:		Total Paid:

Travel Expenses if Applicable:

Trip 1: Flight/Car Rental/Transportation/Gas		
Trip: 1 Food and Lodging		
Other:		
Other:		
Other:		
Total Cost for Travel:		Total Paid:

Burkholder Family Foundation Grant Application

Grants, Fundraising and Donations

What grants have you been awarded? Please list amounts and providers below.

1	Grants Awarded	Amount	Funds Received		Funds Used		Matching Grant	
			Yes	No	Yes	No	Yes	No
2			Yes	No	Yes	No	Yes	No
3			Yes	No	Yes	No	Yes	No
4			Yes	No	Yes	No	Yes	No
5			Yes	No	Yes	No	Yes	No

What other grants have you applied for that are still pending, resubmitted or denied? Please list where you applied and the status of application:

1	Grants Pending	Current Status
2		
3		
4		
5		

If you have fundraised or plan to fundraise, please list all fundraisers below. Please indicate if the fundraiser has been completed and how much money has been raised.

1	Fundraising Type	Completed/ Planned	Amount Raised	Amount Projected
2				
3				
4				
5				
6				

If you have received any donations from friends, family or church, please list below:

Name		Amount	Name		Amount
1			5		
2			6		
3			7		
4			8		

List any social media fundraising or crowdfunding sites: _____

Have you used loans or used credit cards to pay adoption costs?
 Yes: ____ No: ____ Amount: \$ _____

Factoring in all available funds; received or projected what is your estimated remaining need: \$ _____

