## **GRACE BIBLE CHURCH ADOPTION GRANT APPLICATION**

#### **PROCESS**

- Grace Bible Church members may submit this application after their home study is complete.
- Apply for a grant online and send in all applicable documentation to Grace Bible Church, 2956 Ansol Lane, Virginia Beach, VA 23452. Please note, you may only submit one application for assistance per adoption.
- Grace Bible Church must receive the completed application before the placement of a child in your home. This allows Grace Bible Church to comply with IRS guidelines and ECFA best practice.
- You will receive an email from Grace Bible Church regarding whether or not you've been selected for a grant and the amount of the grant, if applicable. Applications will be reviewed quarterly.

## **APPLICATION CHECKLIST**

To help Grace Bible Church process your application in timely manner, please use this as a checklist to ensure you have addressed all the necessary items. Everything on this checklist must be received before your application can be processed. Thank you!

- ✓ Application
- ✓ Adoption Costs
- ✓ Statement of Net Worth
- ✓ Cash Flow
- ✓ Adoption Testimony
- ✓ Father's Salvation Testimony
- ✓ Mother's Salvation Testimony
- ✓ Signed Consent Form
- ✓ Picture of Child
- ✓ Last Year's Tax Return (1040 Form-first 2 pages only)
- ✓ Copy of Completed Home Study
- ✓ Letter of Reference from a Grace Bible Church Ministry Leader or Pastor in Support of Your Adoption.

## **PERSONAL INFORMATION**

Father's Full Name	Age
Mother's Full Name	Age
Mailing Address	_
City, State & Zip Code	<del></del>
Father's Phone #	
Mother's Phone #	
Father's Email Address	
Mother's Email Address	
Who is the primary contact? Circle one Father	Mother
Date of Marriage	
Any prior divorce? Date	
Mother's EmployerLe	ength of Employment
Husband's Employer	Length of Employment
1. Date of birth of father//	
2. Date of birth of mother//	
3. Names and ages of biological children in family:	
4. Have you adopted previously? If yes, names,	s/ages
5. Have you completed your dossier? (if international)	
6. Do you have a specific child identified already?	
If yes, Full Name Age	GenderCountry
7. Do you plan on adopting an older/special needs child?	·
8. When did you become a member of Grace Bible Churc	ch? Mother: Father:
9. What church ministries & or community groups that yo	ou are a part of?
10. Specify any special financial considerations or circums	stances Grace Bible Church should be aware of:
11. Name of agencies that you are working with:	

# **ADOPTION EXPENSES**

**Expenses** (Please note N/A if not applicable. Under amount please total all fees for that category if you are using more than one agency.)

Applicable Expenses	Amount
Agency Fee	
Foreign Program Fee	
Child's Medical Exam fee	
Home Study Fee	
In-Country Fees	
INS Fees (international adoptions only)	
Notarization/Authentication	
Orphanage Fees	
Overseas Fees	
Translation Fees	
Travel First Trip	
Travel Second Trip	
Visas	
Other- Please specify	
Other- Please specify	
Other- Please specify	
Total Adoption Costs	

Available Resources to Cover Adoption Costs (Please note N/A if not applicable)

Resources	Amount
Personal Funds (savings, etc.)	
Employer Benefit (if available)	
Other Grants/Loans Received (please specify	
source)	
Other Source of Funds (please specify)	
Total Estimated Resources	

Deficit	
Total Resources – Total Cost=	(Deficit)

# Additional Grants/Loans Applied For:

Name	Amount

# **STATEMENT OF NET WORTH**

## **Assets**

Asset	Amount
Cash	
Checking Accounts	
Savings Accounts	
Investment Accounts (other than retirement)	
Life Insurance Cash Surrender Value (not death	
benefit)	
Retirement Accounts	
Value of Autos	
Value of Home (if owned)	
Approximate Value of Household Items	
Value of Other Items You Own Not Listed Above	
(write a brief description)	
Total Assets	

# Liabilities

Liabilities	Amount
Outstanding Credit Card Balances	
Balances of Past Due Bills (excluding credit cards)	
Auto Loan Balances	
Home Mortgage Balance	
Any Other Amounts Owed (write description)	
Total Liabilities	

Net Worth	
Assets – Liabilities =	(Net Worth)

# **CASH FLOW** (Both monthly and annual columns of cash flow must be completed)

## Income

Income	Monthly	Annual
Gross Salary/Wage		
Investment Income		
Other Income (write descriptions below)		
Total Income		

# Expenses/Payments

Expense/Payment	Monthly	Annual
Taxes and Other Deductions From Paychecks		
Mortgage/Rent		
Property Taxes		
Insurance		
Utilities		
Other Housing Costs		
Telephone (including cell phones)		
Food		
Clothing		
Car Payments		
Car Insurance		
Gas/Maintenance		
Other Transportation Expenses		
Entertainment/Recreation		
Medical Expenses (include health insurance if		
paid directly by you, not your employer)		
Church Giving		
Other Charitable Donations		
Other Debt Repayment (write descriptions		
below)		
Total Expenses/Payments		

Cash	low
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Total Income - Total Expenses/Payments= Cash I
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# **TESTIMONIES/STATEMENT OF FAITH**

1. How has God led you to adopt? (Please use a separate sheet of paper.)
2. Share your salvation testimonies. (Please use a separate sheets of paper.)
3. I have reviewed and am in alignment with the Grace Bible Church's statement of faith available at http://www.gracebible.church/what-we-believe & (initial)

## **CONSENT FORM**

## 1. Purpose

The undersigned agrees that this application is being made for the purpose of obtaining assistance with orphan care through adoption or foster care. The undersigned further acknowledges that the willingness to accept an application is not any type of acknowledgement or representation on behalf of Grace Bible Church that assistance will be granted or given.

#### 2. Authorization and Release

The undersigned authorizes any pastor, elder, ministry leader, social worker or counselor included in this application to release to Grace Bible Church or its representatives personal information and opinions regarding the applicant's lifestyle, language, habits, truthfulness, parental fitness, and general moral and biblical character.
Orphan Care Agency Case Worker Phone #
3. Limit of Liability
The undersigned acknowledges that Grace Bible Church has made no representation or warranty that financial aid or assistance will be furnished to the undersigned; and further acknowledges that Grace Bible Church shall have the sole discretion to accept or deny this application with or without cause. The undersigned further releases and holds Grace Bible Church harmless from any liability of any type or nature as a result of allowing the undersigned to submit this application.
4. Permission
The undersigned gives Grace Bible Church permission to use their story and/or photographs on Grace Bible Church's website, and/or printed material, with the purpose of helping families to adopt children.
(Your answer does not have an effect on financial assistance.) Yes No
5. We understand that if we decide not to foster, adopt or our adoption is disrupted for any reason we will contact Grace Bible Church immediately.
6. We agree to submit proper documentation as requested by Grace Bible Church for payment and/or reimbursements of any kind.
7. We understand, accept and agree to use any and all funds received by Grace Bible Church exclusively for legitimate orphan care expenses, including but not limited to agency fees, legal fees, etc.
Signatures

we are providing	this information to Grace Bible Church for their internal and confidential use. Al
information conta	nined in this application is accurate to the best of our knowledge.
Adoptive Father:	Date

Adoptive Mother:	Date	

Application must be printed and signed in order to be processed.