

Calvary Chapel Orphan Ministry/Adoption Fund

Overview

The purpose of the adoption fund is to help with families' basic financial adoption needs, which can be daunting for the average family and a considerable roadblock to adopting. The adoption fund is completely funded through gifts from our church members, their family and friends. It is intended to help cover adoption-related costs in conjunction with other sources of adoption assistance and personal stewardship. It is our hope that prospective adopting parents will go from saying, "This can't be done" to saying, "With God's help, we can do this." We provide smaller grants ranging from \$500 - \$1500 in order to help boost people over potential financial barriers. The amount will also be dependent upon monies available in our account.

The adoption fund is open for applications from heterosexual Christian couples and heterosexual Christian single parents who are pursuing adoptions through a non-profit 501(c)(3) agency who have completed their home study and reside in the Tri-City and surrounding area.

Applying

Steps for applying are:

1. Complete an adoptive home study and submit to your agency per your agency's and social worker's guidelines.
2. Complete this Adoption Fund Application - (attached)

Please consider giving to the Calvary Chapel Orphan Ministry Fund. All gifts are provided as a benefit to qualified adoptive families, and are administered through the Calvary Chapel Orphan Ministry Fund Committee and Calvary Chapel Elders for final approval.

To contribute to the Adoption Fund, designate your gift by writing "Orphan Ministry Fund" on an envelope with your contribution inside or indicate on your check.

Adoption Assistance Fund Application

Requirements

Your home study or home study update must be satisfactorily completed prior to submitting an application. Applications cannot be accepted post-placement. At this time, adoptions must be in process through a 501(c)(3) agency. Once the review is complete, all decisions are final. We cannot allow re-application or reconsideration of denied applications. Additional financial documentation may be requested during the application evaluation.

Funds will be dispersed to your adoption agency – IRS regulations place strict limits on disbursement of charitable funds directly to individuals or families. This policy also ensures that funds are used for its intended purpose.

The CCTC Orphan/Adoption Ministry leadership board will review applications and make a recommendation to the CCTC Elder board. The CCTC Elder board will make final determinations and approvals.

CALVARY CHAPEL TRI-CITIES ORPHAN MINISTRY

ADOPTIVE FAMILY FINANCIAL ASSISTANCE APPLICATION

SUBMIT APPLICATION TO: KIRSTEN & LANCE VICKERMAN
5920 W 20TH AVE
KENNEWICK, WA 99338
509-735-6567

I. GENERAL INFORMATION

Contact Information:

Grant Application Date (today's date): _____

Full Name _____ Age _____

Spouse Full Name (if applicable) _____ Age _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail Address(es) _____

Other General Information:

Date of Marriage (if applicable) _____

Ages of dependent children currently in your immediate family? _____

Are any current children adopted? ____ If yes, adoption date(s) and country _____

Age (or range) of child you are adopting _____ Do you plan on adopting a special needs child? ____

Are you adopting a sibling group? ____ If yes, how many? _____

Are there any special considerations we should be aware of? _____

II. EMPLOYMENT INFORMATION *(INCOME INFORMATION REQUESTED BELOW)*

Applicant's Employer _____ Position _____

Length of Employment _____ Does your employer have adoption benefits? ____

Spouse's Employer _____ Position _____

Length of Employment _____ Does your employer have adoption benefits? ____

III. CHURCH INFORMATION AND PERSONAL TESTIMONY

Name of Church _____ Denomination _____

Church Address 1: _____

Church Address 2: _____

Church City _____ Church State _____ Church Zip Code _____

Church Country _____ Church Phone _____

Church website address: _____ Sr. Pastor's Name: _____

Does this church have an adoption ministry? _____ Do you belong to a small group? _____

Do you volunteer at this church? _____ If yes, please list activities _____

Who is God?

Who is Jesus Christ?

Who is the Holy Spirit?

How do you use God's Word (the Bible) in your daily life?

Describe your daily walk with God:

What is eternal salvation? How do you become saved?

How has God led you to adopt?

IV. FINANCIAL INFORMATION

Applicant's total earnings (wages, salaries, tips, etc.) in the last year? _____

Spouse's earnings (wages, salaries, tips, etc.) in the last year? _____

Most current combined Adjusted Gross Income from tax return _____

Previous year's combined Adjusted Gross Income from tax return _____

Applicant and spouse total current balance of cash, savings, and checking accounts

Applicant and spouse net worth (*net worth = current value of assets less debt owed*)

What is the fair market value of your home? _____ What is your home equity? _____

What is the net worth of your deferred assets (retirement, IRA's, etc.)? _____

What is the net worth of your non-deferred assets (cash, bonds, stocks, etc.)? _____

What is the net worth of your (and spouse's) current business and/or investment farms? _____

Approximately how much consumer debt (credit card, car/boat loans, etc.) do you carry monthly?

What is the annual amount of your earned income credit from IRS Form 1040? _____

What is the annual amount of any additional child tax credit from IRS form 1040? _____

What is the annual amount of child support you received for all children (do not include foster care or adoption payments), for the most current year? _____

What is the annual amount of child support you paid because of a divorce or separation or as a result of a legal requirement, for the most current year? _____

What is the annual amount of money received, or paid on your behalf (e.g. bills) not reported elsewhere on this form, for the most current year? _____

How much do you give annually to non-profit organizations? _____

Do you rent your living space? _____

Comments/Special financial circumstances to be considered: _____

Expenses

Agency Fees \$ _____
 Child's Medical Exam \$ _____
 Foreign Program Fee \$ _____
 Home Study \$ _____
 In-Country Fees \$ _____
 INS Fees \$ _____
 Notarization/Authentication \$ _____
 Orphanage Fees \$ _____
 Overseas Fees \$ _____
 Translation Fees \$ _____
 Travel First Trip \$ _____
 Travel Second Trip \$ _____
 Visas \$ _____
 Other: _____ \$ _____
 Other: _____ \$ _____

Total Adoption Cost \$ _____

Available Resources to Cover Adoption Costs

Personal Funds (savings, etc.) \$ _____
 Employer Benefit (if available) \$ _____
 Personal Fundraising \$ _____
 Donations \$ _____
 Grants/Loans Received:
 Name: _____ \$ _____
 Name: _____ \$ _____
 Name: _____ \$ _____
 Other: _____ \$ _____

Total Estimated Resources \$ _____

Deficit (*Total Resources - Total Cost*) \$ _____

What types of things have you done with your family budget or assets in order to save money for adoption costs?

What types of fundraisers have you tried? Where they successful?

How many places have you submitted grant application to? Have you been accepted, denied or waiting for approval still?

V. AGENCY AND ADOPTEE INFORMATION

Are you adopting through an official 501(c)(3) placement agency? _____

Date home study was satisfactorily completed _____ Date dossier was completed _____

Adoption Agency Name _____

Agency Address _____

Agency City _____ Agency State _____ Agency Zip Code _____

Agency Phone _____

Caseworker's Name _____ Caseworker's Business Phone _____

Caseworker e-mail address _____

We realize that you may not yet have answers to the following questions. If you do not yet know an answer, simply leave the field blank--this will not impact your application. However, we ask that you do fill in the final box below to provide us with some information about your inspiration for adopting.

Adoptee's First Name _____

Adoptee's Last Name _____

Adoptee's Birthdate _____

Adoptee's Country of Origin _____

Expected Placement Date _____

Additional Information:

Are there any additional needs/special considerations? _____

What has inspired you to build your family through the miracle of adoption? _____
