



Unannounced Visit Report

Resource Family Name	Date of Visit	Completed By
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- A. Adults and children present:**

- B. Home environment:**

- C. Interaction between the foster child and the resource family:**

- D. Foster child's perception of the resource parents, their children and other adults in the home; discipline used, religious training, school, contact with child's parents, and purpose of their placement in foster care:**

- E. Resource parents' view of the child, the child's problem, placement worker's involvement, plan for the child, involvement of natural parents, and additional services that the foster child or resource parents need:**

- F. Progress on completing in-service training:**

- G. Awareness of license capacity and compliance:**

- H. Any previous or current concerns, cited deficiencies from Department workers:**

- I. Discussion of placements this year, and if none, why:**

- J. Recommended action:**

Signature of Resource Family Licensees	Date
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