

RELATIVE RESOURCE IDENTIFICATION

I/We, the undersigned parent(s) of _____
(name of child or children), am/are providing the following names to the Shelby County Department of Human Resources as potential relative resources for the possible placement of my/our child. I/We understand that these individuals will be contacted to determine if they are willing and able to serve as a placement resource for my/our child until such time as my/our child may be reunified with me/us and I/we give my/our permission to SCDHR to make contact with these individuals for that purpose. I/We understand that my/our child will not be placed with any such individual named herein until such time as the individual has been subjected to an appropriate background check and home study. I/We further understand that such placement may require Court approval. Finally, I/We agree that I/We will provide information on any additional relative resources as soon as we have such information.

**** Please complete this entire form, listing the relationship to the CHILD, not the parent.****

MATERNAL RELATIVES

Maternal Grandmother (mom's mom):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Maternal Grandfather (mom's dad):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Grandmother (mom's grandmother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-grandfather (mom's grandfather):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Great-Grandmother (mom's GGM):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Great-Grandfather (mom's GGF):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Aunt (mom's aunt):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Uncle (mom's uncle):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Aunt (mom's sister):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Uncle (mom's brother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Cousin (mom's niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Aunt (mom's aunt):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Uncle (mom's uncle):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Aunt (mom's sister):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Uncle (mom's brother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Cousin (mom's niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Second cousin(mom's grand niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Stepfather: _____

Address: _____

City, State, Zip: _____

Any other Maternal relatives:

Name: _____

Relationship: _____

Address: _____

City, State, Zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, Zip: _____

Phone: _____

Second cousin (mom's grand niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, Zip: _____

Phone: _____

Name: _____

Relationship: _____

City, State, Zip: _____

Phone: _____

PATERNAL RELATIVES

Paternal Grandmother (dad's mom):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Paternal Grandfather (dad's dad):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Grandmother (dad's grandmother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Great-Grandmother (dad's GGM):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Aunt (dad's aunt):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Uncle (dad's uncle):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Aunt (dad's sister):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-grandfather (dad's grandfather):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great-Great-Grandfather (dad's GGF):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Aunt (dad's aunt):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Great Uncle (dad's uncle):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Aunt (dad's sister):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Uncle (dad's brother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Cousin (dad's niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Second cousin(dad's grand niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Stepfather: _____

Address: _____

City, State, Zip: _____

Any other relatives:

Name: _____

Relationship: _____

Address: _____

City, State, Zip: _____

Phone: _____

Uncle (dad's brother):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Cousin (dad's niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Second cousin (dad's grand niece/nephew):

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, Zip: _____

Phone: _____

Name: _____
Relationship: _____
Address: _____
City, State, Zip: _____
Phone: _____

Name: _____
Relationship: _____
Address: _____
City, State, Zip: _____
Phone: _____

I understand that the foregoing information may be submitted to the Court for purposes of identifying all possible relative resources for my child. I attest that the information contained herein is true and accurate to the best of my knowledge, information and belief.

Parent Signature

Date

Parent Signature

Date