



**Licensed Family Foster Home**

**Report of Reading DCCCA Monthly Newsletter**

Foster Parent's Name: \_\_\_\_\_ FFH License Number: \_\_\_\_\_

Date of Reading: \_\_\_\_\_ Month/Year of Newsletter: \_\_\_\_\_

Which article or articles did you find most interesting or helpful? \_\_\_\_\_

Evaluate the article: [Check one] \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor

Please answer the following questions:

1. Summarize the article in 25 words or less: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please discuss the significant observations included in the article which you can use in your foster home.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If this article did not provide information which you can use, what were you hoping it would provide?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved for .5 clock hours.

\_\_\_\_\_  
(Foster Parent Signature) (Date)

\_\_\_\_\_  
(Sponsoring CPA Name)

\_\_\_\_\_  
(Name of Family Foster Home as it appears on the license)

\_\_\_\_\_  
(CPA Family Foster Home Licensing Social Worker) (Date)

\_\_\_\_\_  
(Address of Family Foster Home) (County)

\_\_\_\_\_  
(Telephone # of CPA Social Worker)

\_\_\_\_\_  
(Telephone # of Family Foster Home)