



3355 Lenox Road Suite 750 Atlanta, Georgia 30326 / Phone 678-860-0849 / www.myadoptionresources.com

Reference Letter

1. Name the applicant(s) in which you are completing this reference letter for: _____
2. How long have you know the applicant(s) _____
3. What is your relation to the applicant(s) _____
4. How would you describe their lifestyle, religious and cultural activities? _____

5. How would you describe their home in terms of stability, communication, support network, etc? _____

6. Describe their interactions with children? _____

7. What special qualities will they bring to parenting? _____

8. Are you aware of any aspects of their background or personality that may interfere in the successful parenting of a child? _____

9. Do you have any doubts, reservations or hesitations about the applicant(s)? _____

10. Are there any other comments you would like to share? _____

11. Do you believe this applicant(s) will or will not make a good adoptive parent to a child? _____

Please indicate why or why not?

12. Would you like to share any additional information regarding this applicant? _____

- Print Name: _____
- Signature: _____ Date: _____
- Address: _____
- Phone: _____

***Please return to this reference letter directly to our agency, either through mail or email. You can scan and email a SIGNED copy of your reference letter to the following:*

Adoption Resources & Counseling, Inc.
3355 Lenox Rd. Ste. 750
Atlanta, Georgia 30326

Email: Info@myadoptionresources.com

*The information provided will be kept confidential and not shared with the applicant **unless** you sign here:*

Signature _____ Date _____