

Kids Resource Network



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Foster Parent Monthly Progress Report

Date:	Name of Child:
Foster Home:	Date of Birth:
Home Supervisor:	Date Placed:
Caseworker:	County:

1. Changes in Past Month:

2. Check the Box, if any of the events listed below have occurred in the Past Month:					
Substance Abuse:	<input type="checkbox"/>	Cruelty to Animals:	<input type="checkbox"/>	Self-Abusive Behavior:	<input type="checkbox"/>
Suicidal Gestures:	<input type="checkbox"/>	Fire Setting:	<input type="checkbox"/>	Stealing:	<input type="checkbox"/>
Sexual Offenses:	<input type="checkbox"/>	Harm to Others:	<input type="checkbox"/>	Runs:	<input type="checkbox"/>
School Suspension:	<input type="checkbox"/>	Expulsion:	<input type="checkbox"/>		<input type="checkbox"/>

***ALL OF THE ABOVE INCIDENTS NEED TO BE REPORTED IMMEDIATELY TO THE CRISES PAGER 719.261.0161**
 *Attach **INCIDENT REPORTS** for these or other delinquent acts.

3. Visits With Biological Family:						
Date:	Length:	Location:	Visit with:	Supervised Y/N	Cancelled Y/N	Phone Calls

3a. Comments About Visit:

4. Medical/Dental/Vision/Medication Info (name/date/medication):

5. School (grades and behavior). Job Info, Developmental Tasks:

6. Therapy Appointments:

7. Other Services (Legal, Court, Alive-E):

8. Social Activities (Sports, Church, Outings, Peer Contact):

9. Life/Developmental Skills in Foster Home (Chores, Privileges, Strengths):

10. Treatment Goals (Behavior problems, Consequences and Results):

A.
B.

11. Positive Progress Seen:

12. Expenses:					
Expense:	Monthly Amount:	Amount Given:	Child's Initials:	Parents Initials:	Date:
Clothing					
Personal Needs					
Allowance					
Savings					
Other					

***Each month, every child must receive a minimum of \$136.00.**

(\$65.00 towards clothing, \$40.00 towards allowance, \$13.00 towards miscellaneous items, and \$18.00 towards education)

*Please include receipts whenever possible.

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