

# CARE TEAM MEMBER - YOUR STRENGTHS

Everyone has skills, talents, and resources they can share with a foster family. Each team member is available at different times and days during the week. As you prepare to be a part of the Care Team, use these questions to determine your capacity and bandwidth to help and share this with your Care Team Leader.

First & Last Name: \_\_\_\_\_

Circle which days of the week and times you are most available:

MONDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
TUESDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
WEDNESDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
THURSDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
FRIDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
SATURDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)
SUNDAY	AM	PM	AFTERNOON	Middle of the night (for urgent needs)

Circle which communication methods **you prefer** the Care Team Leader and foster parent use to contact you.

PHONE CALL      TEXT      EMAIL

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Circle items in the list below that match your strengths and resources. Add to the list additional ways you can contribute.

## PHYSICAL

Yard work  
Household repair  
Mechanical help  
Service project planning  
Sports  
Outdoor activities  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PRACTICAL

Grocery shopping  
Errand running  
Homework help  
Laundry/household help  
Computer/tech skills  
Organizing  
Meal/snack making  
Party/event planning  
\_\_\_\_\_  
\_\_\_\_\_

## EMOTIONAL/MENTAL

Notes of encouragement  
Mentoring: school, career, etc...  
Tutoring: math, art, science, etc...  
Teach a skill  
Attend activities and events to offer support  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_