

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	PRACTICAL	EMOTIONAL/MENTAL
Yard work	Grocery shopping	Notes of encouragement
Household repair	Errand running	Mentoring: school, career, etc...
Mechanical help	Homework help	Tutoring: math, art, science, etc...
Service project planning	Laundry/household help	Teach a skill
Sports	Computer/tech skills	Attend activities and events to offer support
Outdoor activities	Organizing	
	Meal/snack making	
	Party/event planning	