

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>General</b>
<b>Field Name:</b>	<b>Adoption Placement Type</b>
	Foster Parent
	Independent
	International
	Interstate
	No Identified Family
	Non-Relative
	Relative

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>General</b>
<b>Field Name:</b>	<b>At Legal Risk</b>
	Father Not TPR'd
	Mother Not TPR'd
	N/A
	Neither Parent TPR'd
	TPR Under Appeal
	TPR File- Petition Contested

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>General</b>
<b>Field Name:</b>	<b>Child Placed By</b>
	Birth Parent
	CBC Lead Subcontractor
	DCF
	Independent Parent
	Public Agency



	Tribal Agency
--	---------------

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>General</b>
<b>Field Name:</b>	<b>Child Placed From</b>
	In State
	Other Country
	Other State
	US Territory

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>General</b>
<b>Field Name:</b>	<b>Reason (Expressed Intent Withdrawn)</b>
	Family Not Selected – AARC Recommendation
	Ineligible to Adopt
	No Longer Interested
	Other

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Birth Family</b>
<b>Field Name:</b>	<b>Mother Married at Child's Birth</b>
	No
	Unable to Determine
	Yes

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Birth Family</b>
<b>Field Name:</b>	<b>Father Married at Child's Birth</b>
	No



	Unable to Determine
	Yes

<b>FSFN Page:</b>	<b>Social-Mental-Physical Conditions</b>
<b>Tab Name:</b>	<b>N/A</b>
<b>Field Name:</b>	<b>Social/Mental/Physical Conditions</b>
	Alcohol Abuse
	Allergic Reactions
	Anemia
	Asthma
	Bi-polar
	Brain Injured
	Cancer
	Criminal Record
	Cystic Fibrosis
	Depression
	Diabetes
	Domestic Violence Victim
	Drug Abuse
	Eating Disorder
	Emotional Problems
	Hearing Impaired
	Heart Disease
	Hemophilia
	Huntington's Disease
	Hypertension/High Blood Pressure
	Illiterate
	Incarcerated
	Life Threatening Disease



Mental Illness
Mental Retardation
Multiple Sclerosis
Multiples (twins, etc.)
Muscular Dystrophy
None
Orthopedic
Other
Other Genetic Disorder
Other Terminal Illness
Physically Abusive
Prostitution
Schizophrenia
Seizure Disorder
Sexually Abusive
Sickle Cell Disease
Sickle Cell Trait
Suppressed Immune Deficiency
Visually Impaired

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Background</b>
<b>Field Name:</b>	<b>Emotional</b>
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	<b>Adoption Information</b>
-------------------	-----------------------------



<b>Tab Name:</b>	Background
<b>Field Name:</b>	Behavioral
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	Adoption Information
<b>Tab Name:</b>	Background
<b>Field Name:</b>	Physical
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	Adoption Information
<b>Tab Name:</b>	Background
<b>Field Name:</b>	Intellectual
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	Adoption Information
<b>Tab Name:</b>	Background
<b>Field Name:</b>	Exceptional Education Needs
	Gifted
	Intensive
	Minimal



	Moderate
	None

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Background</b>
<b>Field Name:</b>	<b>Visual or Hearing Disabilities</b>
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Background</b>
<b>Field Name:</b>	<b>Other Conditions Requiring Special Care</b>
	Intensive
	Minimal
	Moderate
	None

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Background</b>
<b>Field Name:</b>	<b>Primary Basis for Special Needs</b>
	Age
	At risk on medically diagnosed condition
	Developmental Delay
	Emotional Disability
	Intellectual Disability
	Medical Fragile
	Member of Minority Group



	Member of Sibling Group
	Physical Disability
	Visually/Hearing Impaired

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Removal/Placement</b>
<b>Field Name:</b>	<b>Type</b>
	Adoption
	Duplicate
	Foster Care
	ICPC
	Investigation
	Relative/Non Relative
	Services

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Matches</b>
<b>Field Name:</b>	<b>Match Outcome</b>
	Accepted
	Pending/Updated Home Study Needed
	Pending/Updated Home Study Requested
	Potential
	Rejected by Family
	Rejected by Staff

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Available Status</b>
<b>Field Name:</b>	<b>Current Available Status</b>
	Available



	Closed-Deceased
	Closed-Aged 18/Permanency Plan Not Achieved
	On Hold- TPR on Appeal
	On Hold- Identified Local/In-State Family
	On Hold- Relative Adoption
	On Hold- Foster Parent Adoption
	On Hold- Out-of-State Family/ICPC
	Withdrawn- Adoption Finalization
	Withdrawn- Goal Changed
	Withdrawn- Placed

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Available Status</b>
<b>Field Name:</b>	<b>Photograph Submitted</b>
	Yes
	No

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Available Status</b>
<b>Field Name:</b>	<b>Sibling Photograph Submitted</b>
	Yes
	No

<b>FSFN Page:</b>	<b>Adoption Information</b>
<b>Tab Name:</b>	<b>Available Status</b>
<b>Field Name:</b>	<b>Current Web Status</b>
	Child Web Pending
	Sibling Web Pending
	Child Web Authorized





	Sibling Web Authorized
--	------------------------

