

South Carolina Department of Social Services
BABYSITTER INFORMATION

I/We have identified babysitters that will be used for short periods of time for our foster children. Their names and addresses are below:

I/We understand that extended periods of time (e.g., greater than two days) may require foster child/ren to be placed in respite care. I/We agree to inform the foster child's caseworker of any plans that may require the foster child to be placed out of my care. I/We understand that the child's worker must be informed of placement changes prior to the event.

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Resource Parent's Signature

Date

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Resource Parent's Signature

Date