



Thank you for your interest in applying for the RACE for the Orphans, Inc. Adoption Assistance Grant. It is our great honor to be able to offer this grant opportunity and we want to make this application process as simple as possible. Below you will find all the important details you need to successfully complete the grant application. As with all paperwork in the adoption process, submitting a complete and accurate application will help ensure timely processing of your grant application. Should you have any questions as you complete this form, please don't hesitate to contact Kelly Preston, RACE for the Orphans Director, at 770-310-8222 or kelly@racefortheorphans.org.

Again, thank you for your application, and many blessings to you on your adoption journey!

Eligibility Criteria for Adoption Assistance Grant

- 1. Every applicant must confess Jesus Christ as Lord and Savior.
- 2. Every applicant must be a married couple (man and woman).
- 3. Every applicant must be a resident of the state of Georgia.
- 4. Every applicant must be a member of a local Christian church.
- 5. Every applicant must have their home study complete for either international or domestic adoption.
- 6. Every applicant must be present at the RACE (unless traveling overseas to bring child home) if selected as a grant recipient.

Grant Partnership Information

RACE for the Orphans, Inc. is a 501(c)(3) (non-profit) organization. RACE for the Orphans partners with Lifesong for Orphans, also a 501(c)(3)(non-profit) organization, to provide this Adoption Grant Assistance Program. To learn more about each of these organizations, please visit their websites:

RACE for the Orphans www.racefortheorphans.org

Lifesong for Orphans www.lifesongfororphans.org

Application Instructions

Please complete the Lifesong Grant Application for RACE for the Orphans and submit using the instructions below.

Page 1	Personal Information and Adoption Cost Information
	Please enter N/A for any expense that does not apply to your adoption.
Pages 2-4	Adoption Costs, Statement of Net Worth, and Cash Flow
	For any item that does not apply, please enter 0.00.
Page 5	Personal Statement of Faith
	Please answer each question individually, using separate pieces of paper for
	complete answers as needed.
Pages 6-7	Consent Form
	For Consent Item 7 "Request Type," please see the "Note" under the three
	options. If you want to apply for the RACE for the Orphans Matching OR Direct
	Grant AND also receive fundraising support from Lifesong, check BOTH of
	those options.
Page 8	Application Checklist

Please complete and attach to front of application packet.

Deadline

Applications can be completed and sent to Lifesong at any time for Fundraising Support, but in order to be considered for a RACE for the Orphans Grant, <u>applications must be received by Lifesong by March 1, 2022</u>. Applicants selected for a RACE for the Orphans Grant will be notified by the first week of April.

Submit Application

Please send a series of emails with all completed documents to kay@lifesong.org. Then please mail a hard copy of all completed documents to:

Lifesong for Orphans Attn: RACE for the Orphans Adoption Fund PO Box 9 Gridley, IL 61744

For more information, please contact:

Kelly Preston
RACE for the Orphans Director
770-310-8222
kelly@racefortheorphans.org



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Husband's Full Name	Age
Wife's Full Name	Age
Street Address	
City S	State Zip Code
Home Phone Number Cell/Wor	rk Phone
Primary Email Address Secondar	ary Email Address
Date of Marriage Any prior divorce	e? Date
Husband's Employer	Length of employment
Wife's Employer	Length of employment
1. Date of Birth of Husband///	
2. Date of Birth of Wife///	
3. Names and ages of biological children in family	
4. What date (month & year) did you start this adoption journ	
5. Have you adopted previously? Yes No If yes, nam	
6. Have you completed your dossier?	
7. Do you have a specific child identified already for this adop	ption?
If yes, Full Name Age _	Sex Country
8. Do you plan on adopting an older/special needs child?	
9. Which Church do you attend?	Are you members? Yes No
10. Church Activities	
11. Do you profess Jesus Christ as your personal Lord and Savi	vior?
12. May we contact your pastor? Yes No Pastor's	Name
Church Phone Cell Phone	
13. Family blog info	
14. Specify any special financial considerations or circumstance	



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ADOPTION COSTS

TYPE OF EXPENSE	AMOUNT	TYPE OF EXPENSE	AMOUNT
Agency Fees		Overseas Fees	
Child's Medical Exam		Translation Fees	
Foreign Program Fee		Travel 1 st Trip	
Home Study		Travel 2 nd Trip	
In-Country Fees		Visas	
INS Fees		Other	
Notarization/Authentication		Other	
Orphanage Fees		TOTAL ADOPTION COST:	

Please indicate how you intend to finance your adoption costs:	
Personal Funds: (savings, etc.)	\$
Employer Benefit: (if applicable)	\$
Other Grants/Loans Applied For:	
Name:	\$
Name:	\$
Name:	\$
Other source of funds: (please specify)	\$
Total Estimated RESOURCES:	\$
DEFICIT: (Total Resources – Total Cost)	\$



NET WORTH

(Assets - Liabilities)

ADOPTION GRANT & LOAN APPLICATION

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STATEMENT OF NET WORTH	
As of Date/	
The following needs to be a complete list of the balances or values of the iten and balances of amounts you owe (liabilities) as of the above date.	ns you have ownership of (assets)
ASSETS	
Cash	\$
Checking Accounts	\$
Savings Accounts	\$
Investment Accounts (other than retirement)	\$
Retirement Accounts	\$
Life Insurance Cash Surrender Value (not death benefit)	\$
Value of Autos	\$
Value of Home	\$
Approximate Value of Household Items	\$
Value of other items you own not listed above (write description):	
	\$
	\$
·	\$
TOTAL ASSETS	\$
	·
LIABILITIES	
Credit Card Balances	\$
Balances of Past Due Bills (excluding credit cards)	\$
Auto Loan Balances	\$
Home Mortgage Balance	\$
Any Other Amounts Owed (write description):	
	\$
	\$
	\$
TOTAL LIABILITIES	\$



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CASH FLOW STATEMENT

(Both monthly and annual columns of cash flow must be completed.)

	Monthly	Annual
INCOME	•	
Gross Salary/Wage	\$	\$
Investment Income	\$	\$
Other Income (write description):		
	\$	\$
	\$	\$
TOTAL INCOME	\$	\$
CHURCH GIVING	\$	\$
EXPENSES/PAYMENTS		
Taxes and other deductions from paychecks	\$	\$
Housing Costs:	,	•
Mortgage/Rent	\$	\$
Property Taxes	\$	\$
Insurance	\$	\$
Utilities	\$	\$
Other Housing Costs	\$	\$
Telephone (include cell phones)	\$	\$
Food	\$	\$
Clothing	\$	\$
Transportation Expenses:		•
Car Payment	\$	\$
Car Insurance	\$	\$
Gas/Maintenance	\$	\$
Other Transportation Expenses	\$	\$
Entertainment/Recreation	\$	\$
Medical Expenses (include health insurance if paid by you)	\$	\$
Other Charitable Gifts	\$	\$
Other debt payments/expenses not listed above (write descr	iption):	
	\$	\$
	\$	\$
	\$	\$
TOTAL EXPENSES/PAYMENTS	\$	\$
CASH FLOW	\$	\$
(Total Income – Church Giving and Total Expenses/Payments)	Υ	۲



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PERSONAL STATEMENT OF FAITH

1.	Who is God?
2.	Who is Jesus Christ?
3.	Who is the Holy Spirit?
4.	How do you use God's Word (the Bible) in your life?
5.	Describe your daily walk with God?
6.	What is eternal salvation? How do you become saved?
7.	Share your salvation testimonies. (Please use a separate sheet of paper)
8.	How has God led you to adopt (adoption testimony)? (Please use a separate sheet of paper)



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CONSENT FORM

1. PURPOSE

The undersigned agrees that this application is being made for the purpose of obtaining assistance with international or domestic adoption. The undersigned further acknowledges that the willingness to accept an application is not any type of acknowledgement or representation on behalf of *Lifesong for Orphans* that assistance will be granted or given.

2. AUTHORIZATION AND RELEASE

The undersigned hereby authorizes any officer, employee, agent, representative or staff member of *Lifesong for Orphans* to obtain financial and personal information from any institution or individuals including but not limited to those individuals and institutions listed as references and made a part of this application. The undersigned further consents to the release of any information to any authorized *Lifesong for Orphans* employee or agent from any individual or financial institution listed on the attached list of references. The undersigned further authorizes any pastor, elder, minister or counselor included in the list of references to release to *Lifesong for Orphans* or its representative's personal information and opinions regarding the applicant's lifestyle, language, habits, truthfulness, parental fitness, and general moral and biblical character.

Adoption Agency:	Case Worker:		Phone:	
3. LIMIT OF LIABILITY				
aid or assistance will be furn have the sole discretion to a	ges that Lifesong for Orphans has ished to the undersigned; and fur common the common that the	rther acknov :h or withou	· vledges that <i>Lifesong</i> ; t cause. The undersig	for Orphans shall ned further
4. PERMISSION				
The undersigned gives Lifeso	ng for Orphans permission to use	e their story	and/or photographs of	on the <i>Lifesong</i>
for Orphans website, and/or	printed material, with the purpo	se of helpin	g families to adopt chi	ildren. (Your
answer does not have an eff	ect on financial assistance)	Yes	No	

5. SUPPORT RAISING AGREEMENT

The undersigned parties acknowledge they are freely agreeing to the following terms and conditions as a requirement to participate in the adoption grant process for Lifesong for Orphans (LS):

- 1. If participating in a matching grant, we commit to reaching out to friends and family for support.
- 2. We understand we may not donate money to LS towards our own adoption expenses and receive a tax deduction.
- 3. We understand and accept that all funds and/or donations received by LS are under the ultimate control of the LS Board of Directors that make all final decisions regarding distributing and/or grants and loans of any funds.
- 4. We understand any funds raised (including matching grant amount, if applicable) beyond our documented adoption costs may be used to further the ministry of LS and assist with other Race for Orphans families' cost of adoption.
- 5. We understand that if we decide not to adopt or our adoption is disrupted for any reason, we will contact LS immediately. Any funds raised that have not been disbursed for adoption related costs will be used to further the ministry of LS and assist other Race for Orphans families with the cost of adoption. **Donations cannot be returned to donors**.



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- 6. We agree to submit proper documentation as requested by LS for payment and/or reimbursements of any kind.
- 7. We understand, accept and agree to use any and all funds received by LS exclusively for legitimate adoption expenses, including but not limited to agency fees, legal fees, etc. We agree to provide verification of adoption related expenses to LS upon request.

6. ATTACHMENTS

- 1. **Picture** If you have a picture of the child you desire to adopt, and are willing to share with us, please send in a photo along with your application. Please also include a photo of your current family.
- 2. **Tax Return** Please send us a copy of your most current year's Federal Tax Return (1040 form-1st 2 pages only)
- 3. *Copy of Homestudy* Please send us a copy of your completed Homestudy
- 4. **Letter from Pastor** A written reference from one of your pastors on church letterhead indicating his support of your adoption.

7. REQUEST TYPE	
	oport raising kit, including a free on-line crowdfunding in to support your adoption to receive tax-deductions
	g grant and a support raising kit. The grant acts as a vish to support your adoption to receive tax deductible grant helps to raise at least 2-4 times the grant
■ Direct Grant – We provide a grant to be used toward support are also available for your use.	ards your adoption costs. All our fundraising tools and
Note: Application processing time frame: 8-10 weeks There are a limited number of funds that can be given as G money is available, we can still serve as a tax-deductible ve above).	
8. SIGNATURES We are providing this information to Lifesong for Orphans contained in this application is accurate to the best of our l	
Adoptive Father	Date:
Adoptive Mother	Date:

Submit Application to: <u>kay@lifesong.org</u> and then mail to:

Lifesong for Orphans

Attn: RACE for Orphans Adoption Fund

PO Box 9

Gridley, IL 61744



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APPLICATION CHECKLIST

To help us process your application in a more timely manner, please use this as a checklist to ensure you've included all the necessary items. If you don't have something included, please give us an explanation for this. Thank you!

INCLUDED	NOT INCLUDED INFORMATION	EXPLANATION
	Adoption Grant & Loan Application	
	Adoption Costs	
	Statement of Net Worth	
	Cash Flow	
	Statement of Faith	
	Husband Salvation Testimony	
	Wife Salvation Testimony	
	Adoption Testimony	
	Pastor Referral Letter	
	Picture of Your Family	
	Picture of Your Child (If Available)	
	Signed Consent Form & Request Type	
	Signed Home Study Complete	
	Last Year's Tax Return (1040 Form 1st 2 pages on	ly)





^{*} Please attach this to the front of your application. If all information is not submitted, it may delay your file being processed. Thank you.