



FAQs

The Grandparent Caregiver Program: What You Need to Know

The Grandparent Caregiver Program (GCP) helps low-income District residents who are raising their grandchildren, great-grandchildren, great-nieces, or great-nephews. Those who qualify may get money every month to help care for children living with them. These Frequently Asked Questions (FAQs) outline some key practice requirements of the program.



Do I need legal custody to qualify for the program?

You are not required to have legal custody of the child, but you must prove that you are the child's primary caregiver. There are two ways you can do this:

The first way is to provide one of the following documents:

- A court order, signed by a judge, granting you custody of the child; or
- A court order, signed by a judge, granting you standby guardianship of the child, pursuant to D.C. Code § 16-4801–4810; or
- A decree, signed by a judge, stating that you have adopted the child.

Or, if none of the above exist, then you can complete the checklist contained on the [application form](#) which indicates why the parents are unable to care for the child(ren), and also provide one of the following alternative pieces of evidence to confirm for us your caregiver status with the child:

- Records showing that the applicant enrolled the child in school during the most recent school year or that the applicant is the primary educational contact for the child; or
- Immunizations or medical records, no more than two years old, indicating that the applicant is tending to the child's medical needs; or
- Proof that the applicant has been receiving SSI or TANF for the child; or
- A letter from any legal, medical, military, law enforcement, social service or other similar professional, or the applicant's landlord describing the applicant's status in caring for the child.

I've adopted my grandchildren, am I still eligible?

Yes, as long as you are not receiving an adoption subsidy. Please provide us with a copy of your adoption decree.

The child's parent lives in my home. Am I still eligible?

You remain eligible under certain circumstances. The parent may continue to reside in your home if you have a court order granting you standby guardianship of the children, or if the parent is a minor (under 21 years old) who is enrolled in school or has a medically verifiable disability that prevents him or her from caring for the child. Please provide us with documentation to establish these.

I'm the child's aunt, not the grandparent, am I still eligible?

You are not eligible for the GCP, but you may qualify under the Close Relative Caregiver Program. You will be required to prove your relationship to the child. Please see the [Close Relative Caregiver Program Frequently Asked Questions](#) for further information.

How do I prove that I am the child's grandparent?

You prove this in your application through legal documents, birth certificates, paternity acknowledgements, child support agreements, certified DNA test results, or court reports. For example, if you are the child's paternal grandparent (a parent of the child's father) you can provide a letter from the child's father acknowledging he is the father and his birth certificate showing you are his parent.

Why do I need a criminal background check?

ALL adults (anyone 18 or over) in the house must comply with a local criminal history check and a federal background check. This is a program requirement and helps to ensure a suitable environment, including the health, safety, and welfare for the children in the household being considered for a subsidy. You are not automatically disqualified because you or someone in your home has a criminal record. CFSA reviews every case individually and takes into account the entire situation; this includes how long ago the conviction occurred, the type of conviction, and the circumstances surrounding it.

We conduct the criminal background checks at our offices. The adults in your home must schedule an appointment to come to our offices for fingerprinting. There is no cost to you for fingerprinting.

What is the Child Protection Register Check and why do I need it?

The child protection register is our database of those persons responsible for the abuse or neglect of a child. The law requires that all adults in the house (everyone 18 and older) complete a child protection register check so we can ensure the safety of the children in households receiving the subsidy. You are not automatically disqualified if you are listed in the registry. All cases are reviewed on an individual basis.

Included with your application packet is a Child Protection Register form. Each adult living in the house must complete and sign his or her own form and have it notarized or witnessed by a member of CFSA's staff. We will be happy to witness your signature when you come for fingerprinting.

I've been told I cannot get TANF for the children because I get SSI. Am I still eligible?

Yes. It is important to note that you only must APPLY for TANF. If TANF denies you because you currently receive SSI, you may still be eligible for the GCP. In the event you are denied for TANF, proof of that denial will need to be submitted with your application to the GCP.

I'd like to go over my application with someone before I submit it. Can someone review it for me?

Yes. We would be happy to go over your application to make sure it is complete. In order to facilitate this, please call (202)442-6009.

Will I continue to get TANF or SSI if I am awarded this subsidy?

Yes, this money comes in addition to the benefits you already receive. The amount of a subsidy you receive from the GCP is based on how much TANF or SSI you already receive from the government for the child.

How long does the application process take?

It takes us up to 45 days to process your application from the day we receive all of the required documents. Please note the 45 days does not begin until we receive all documents, including the results of the child protection register and criminal background checks. Average processing times are significantly less, however, if you initially submit a complete application. Submitting an incomplete application will delay the processing of your application.

What happens after I am approved?

After you are approved, we will make arrangements for you to review and sign a subsidy agreement. Once you sign the subsidy agreement your case will become active and you will get a debit card. The subsidy is NOT retroactive to the date you first submitted your application.

Is there a waiting list for the program?

The GCP does not have a waiting list.

Can I have the subsidy directly deposited into my bank account?

No. You will be issued a debit card where funds are automatically deposited each month.

Will you inform the child's parents that I am receiving this subsidy?

No. Your application and involvement in this program is confidential. Your personal information may only be released at your request.

What kind of things can I pay for with this subsidy?

You can use the money you receive from this program ONLY on items and activities that benefit the child. They are listed in the subsidy agreement, and include things like: groceries, school clothes, summer camp, a portion of your rent or utilities, etc. The money cannot be used to the benefit of either of the child's birth parents.

If you have questions about **grandparent subsidies**, send an email to cfsa.kinfirst@dc.gov or call (202) 442-6009

POLICY TITLE:	Grandparent Caregivers Program		
	CHILD AND FAMILY SERVICES AGENCY		
Approved By:	Date Approved:	Original Effective Date:	Last Revision:
Brenda Donald	April 26, 2019		April 8, 2020

I. AUTHORITY	The Director of the Child and Family Services Agency (“CFSA”) adopts this policy to be consistent with the Agency’s mission and applicable federal and District of Columbia laws, rules and regulations, including the D.C. Official Code, Title 4, Sections 251.01-251.07 and Title 29, Chapter 68 of the District of Columbia Municipal Regulations (DCMR).
II. APPLICABILITY	Grandparent Caregivers Program staff.
III. RATIONALE	<p>When compared to children in non-relative foster care, children in the care of their adult relatives have more stability. They are more likely to maintain connections with siblings, preserve their cultural heritage, and maintain community bonds.¹ According to the Annie E. Casey Foundation Kids Count Data Center, in 2017 there were 7,000 District children under the age of 18 living in grandparent led households. Many of these grandparents are older residents living on fixed income who have willingly taken on the responsibility of caring for their young relatives, and would benefit from financial assistance toward that end.</p> <p>CFSA’s Grandparent Caregivers Program provides a monthly subsidy to promote stability and family connections for children in the care of their young relatives. It is an investment that is designed to keep these children out of the formal child welfare system.</p>
IV. POLICY	<p>The Child and Family Services Agency (CFSA) administers the Grandparent Caregivers Program (GCP), which provides a monthly subsidy to eligible District of Columbia residents with low incomes who are raising their grandchildren, great-grandchildren, great nieces, or great nephews. Grandparent caregivers use this monetary support to offset the costs of caring for relative children residing with them in the District who might otherwise end up in the foster care system. Please see the Frequently Asked Questions for further information.</p> <p>Within this policy, the term “child” refers to anyone under age 18. The term “parent” means a person who has a parental relationship to the child. The term “caregiver” includes grandparent, great-grandparent, great-aunt, or great-uncle.</p>

¹ “Time for Reform: Support Relatives in Providing Foster Care and Permanent Families for Children.” Kids Are Waiting: Fix Foster Care Now and Generations United, Washington, DC. 2007 and Conway, Tiffany and Rutledge Q. Hudson. “Is Kinship Care Good for Kids?” Center for Law and Social Policy, Washington, DC. 2007

<p>V. CONTENTS</p>	<p>A. Eligibility Requirements for the Grandparent Caregivers Program (GCP) B. Application Process C. Program Limitations D. Annual Review of GCP Subsidies E. Termination of GCP Subsidies F. Appeal Process</p>
<p>VI. SECTIONS</p>	<p>Section A: Eligibility Requirements for Grandparent Caregivers Program (GCP)</p> <p>A caregiver may be eligible to receive the GCP subsidy with proof of the following criteria:</p> <ol style="list-style-type: none"> 1. The caregiver is the natural, adoptive, or step grandparent, great-grandparent, great-aunt, or great-uncle. Proof of relationship is two-fold. First the caregiver must prove relationship between themselves and the parent and second a relationship between the parent and the child to whom the subsidy will be granted. Proof of the relationship is by one or more of the following: <ol style="list-style-type: none"> a. Birth certificate or decree of adoption b. Court determination of paternity c. Acknowledgement of Paternity (AOP) d. Child Support Agreement or Court Order e. Proof that parents were married at time of child’s conception or birth f. Marriage certificate or proof of common law marriage g. DNA test results 2. Residency in the District of Columbia. 3. The child lives in the caregiver’s home <ol style="list-style-type: none"> a. The caregiver has been the child’s sole or primary caregiver b. The child’s parent has not lived in the home with the child and caregiver, unless: <ol style="list-style-type: none"> i. The caregiver is the child’s standby guardian, or ii. The parent is a minor enrolled in school, or iii. The parent is a minor with a medically verifiable disability which prevents the parent from being able to care for the child. 4. The household income is below 200 percent of the federal poverty level. 5. The caregiver has applied for Temporary Assistance to Needy Families (TANF) for the child and an eligibility determination has been made. <ul style="list-style-type: none"> • The amount of a subsidy a caregiver is eligible to receive shall be offset by any amount a caregiver receives as TANF or SSI for the child. 6. The caregiver and all adults residing in the home have submitted to a criminal background check and been “cleared”, or an exception made.

	<p>Section B: Application Process</p> <ol style="list-style-type: none"> 1. Persons meeting the requirements in Section A who want to receive a GCP subsidy must apply with CFSA by completing the Application for Grandparent Caregivers Program Subsidy and provide the necessary proof of being the primary caregiver (see application for accepted documentation). 2. The caregiver and all adults (18 years and older) residing in the home must submit to the clearance process which includes: <ol style="list-style-type: none"> a. Federal Bureau of Investigation (FBI) check b. Metropolitan Police Department (MPD) clearance c. Child Protection Register (CPR) check
	<p>Section C: Program Limitations</p> <p>The provision of a subsidy under the GCP is subject to the availability of appropriated funds.</p>
	<p>Section D: Annual Review of GCP Subsidies</p> <ol style="list-style-type: none"> 1. GCP staff shall complete a review once each calendar year, based upon the certification date for the GCP subsidy. Each review shall determine continuing the receipt of a subsidy based upon the following criteria: <ol style="list-style-type: none"> a. Ongoing maintenance of eligibility requirements in Section A. b. Whether any change of circumstances requires possible modification or termination of a subsidy. c. For school age children, evidence of the child's enrollment and attendance at school. 2. The GCP may also complete a review prior to the anniversary of the certification date in the event of: <ol style="list-style-type: none"> a. Changes in subsidy rates b. Request for review by the caregiver c. Changes to the child's circumstances, including but not limited to possible changes in residence <ul style="list-style-type: none"> • The caregiver shall notify the GCP within 2 weeks of the occurrence of any change in the eligibility criteria and/or any change in address. d. If the child(ren) has/have not resided with the caregiver continuously for at least the most recent 6 months prior to application approval. <ul style="list-style-type: none"> • GCP staff shall complete a review every 6 months. 3. The GCP shall send out the <i>Recertification Package for Grandparent Caregivers Program Subsidy</i> 60-90 days prior to the annual review date. 4. If the GCP has not heard from the caregiver within 45 days of notification, the GCP worker shall call the caregiver and request the completed recertification package within 15 days. If the caregiver does not respond within this timeframe, the subsidy shall be terminated.

	<p>Section E: Termination of GCP Subsidies</p> <ol style="list-style-type: none"> 1. A GCP subsidy shall be terminated under any of the following circumstances: <ol style="list-style-type: none"> a. If at any point the caregiver fails to demonstrate compliance with any of the eligibility criteria outlined in Section A of this policy. b. If the caregiver has not responded to the notification for subsidy review by the recertification date, or otherwise fails to participate in the annual subsidy review. c. When the child turns 18. 2. Notice of termination shall be sent to the last known address by regular mail.
	<p>Section F: Appeal Process</p> <ol style="list-style-type: none"> 1. All caregivers receiving GCP subsidies shall be notified of the right to appeal a change in subsidy. 2. A caregiver aggrieved by a decision of CFSA in connection with the denial, reduction, suspension, or termination of a subsidy, including a failure to act on a request for review, may appeal the decision through a written request for a fair hearing. <i>For more information, see the Fair Hearings Policy.</i>

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



Application for Grandparent Caregivers Program (GCP) Subsidy

Instructions

1. This application must be completed and signed by the person who is applying for a subsidy under the Grandparent Caregivers Program (GCP). CFSA staff is available to help those who need assistance to complete the form.
2. When this application uses the term “child(ren)”, it means the child or children on whose behalf the applicant is applying for the subsidy.
3. Provide proof of relationship with the child by one of the following:
 - Birth certificate(s) or decree of adoption
 - Court determination of paternity
 - [Acknowledgement of Paternity \(AOP\)](#)
 - Child Support Agreement or Court Order
 - Proof that parents were married at time of child’s conception or birth
 - Marriage certificate, proof of common law marriage, or domestic partnership
 - Divorce decree
 - DNA test results
4. Include proof that you are the child’s primary caregiver by one of the following:
 - A court order, signed by a judge, granting you custody of the child; or
 - A court order, signed by a judge, granting you standby guardianship of the child, pursuant to D.C. Code §§ 16-4801–4810; or
 - A decree, signed by a judge, stating that you have adopted the child.

If you do not have any of the above documents, you may still qualify by providing one of the following:

- Records showing that you enrolled the child in school the most recent school year or that you are the primary educational contact for the child; or
- Immunizations or medical records, no more than two years old, indicating that you are tending to the child’s medical needs; or
- Proof that you have received either SSI or TANF for the child; or
- A letter from any legal, medical, military, law enforcement, social service or similar professional, or your landlord describing your status in caring for the child.

AND

- Completing the checklist on page two of the application, stating why the parents are unable to care for the child(ren).

5. All adults (anyone 18 years or older) residing in your home must complete the clearance process which includes three checks: an FBI check, a local police clearance and a Child Protection Register Check. We conduct the entire clearance process at the CFSA office. **The adults in your home must each schedule an appointment to come to our office for fingerprinting. You can make this appointment by calling us at (202) 442-6009.** There is no cost to you for fingerprinting.
6. Included with your application packet is a “Child Protection Register Check” form. This form must be completed by each adult living in the home and is used to determine if the applicant has been accused of child abuse or neglect. This form must either be notarized or witnessed by CFSA staff. We will be happy to witness your signature when you come for fingerprinting.
7. When you have completed your application packet, please call (202) 442-6009 and make an appointment to turn in your application and documents. In most cases, this appointment will be the same day as your fingerprinting appointment.

Return your completed application and all documents to:

DC Child and Family Services Agency
Grandparent Caregivers Program
200 I Street, SE
Washington, DC 20003

NOTE: If you submit an incomplete application package you will receive a letter listing what information is missing. Failure to complete your application within 30 days of the date of that letter may result in your application being closed.

For more information about the Grandparent Caregivers Program, please review the attached Frequently Asked Questions (FAQ) or call 442-6009 and ask for the Grandparent Caregivers Program staff.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency**



Application for Grandparent Caregivers Program (GCP) Subsidy

I. Applicant - Provide the following information about yourself (the person applying for the subsidy).

Name (first, middle, last)					
Street Address (apartment #)					Ward
City, State, Zip					
Email address					
Home Phone		Work Phone		Cell Phone	
Date of Birth		Social Security Number		Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
I am the child's adult	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Great Grandparent	<input type="checkbox"/> Great-aunt	<input type="checkbox"/> Great-uncle	<input type="checkbox"/> Other: _____
Have you ever applied for this program before?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Referred by					
Income	List the total MONTHLY income for the entire household. Include the sources (e.g., TANF, Social Security, employment, annuities, and any other money) in the tables below.				

II. Child(ren) Provide the following information concerning the child(ren) on whose behalf you are applying for the subsidy. Use additional sheets if necessary.

Name (last, first, middle)	Date of Birth	Gender	Monthly Income	Source of Income

III. Other individuals You must provide the following information for EVERY INDIVIDUAL RESIDING IN YOUR HOME other than yourself and the child(ren) for whom you are applying.

Name (last, first, middle)	Date of Birth	Gender	Monthly Income	Source of Income	Relationship to Applicant

IV. Attachments

Please ensure that you have attached each of the following documents to this application:

<input type="checkbox"/>	1. Proof that I am the child's grandparent, great-grandparent, great-aunt or great-uncle (please see the above Instructions for guidance).
<input type="checkbox"/>	2. Proof that I am the child's Primary Caretaker (please see the above Instructions for guidance).
<input type="checkbox"/>	3. Completed applications for Child Protection Register checks for each adult who resides in my home.
<input type="checkbox"/>	4. Proof that I applied for TANF benefits on behalf of the child through the District of Columbia Department of Human Services, Income Maintenance Administration.
<input type="checkbox"/>	5. Proof of household income (i.e., proof of the income of every individual who resides in my house).
<input type="checkbox"/>	6. Proof that I reside in the District of Columbia (e.g., your lease or a bill coming to you at your home address).
<input type="checkbox"/>	7. I have also called the GCPP offices (202-442-6009) to schedule fingerprinting appointments for all adults residing in my home.

V. Attestations and Signature

1. Check all that apply:

<input type="checkbox"/>	The child(ren) reside(s) with me.
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AND

<input type="checkbox"/>	The child's parent does not reside in my home.
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OR

<input type="checkbox"/>	The child's parent resides in my home and I have provided proof that I have been designated as the child's standby guardian, or that the parent is a minor enrolled in school, or that the parent is a minor with a medically verifiable disability that prevents him/her from caring for the child.
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2. The parents are unable to care for the child(ren) because (check all that apply for each parent):

	Parent 1		Parent 2
<input type="checkbox"/>	parent is deceased	<input type="checkbox"/>	parent is deceased
<input type="checkbox"/>	parent is incarcerated	<input type="checkbox"/>	parent is incarcerated
<input type="checkbox"/>	parent is seriously ill	<input type="checkbox"/>	parent is seriously ill
<input type="checkbox"/>	parent is on active military assignment	<input type="checkbox"/>	parent is on active military assignment
<input type="checkbox"/>	parent is not caring for the child because of allegations of abuse or neglect	<input type="checkbox"/>	parent is not caring for the child because of allegations of abuse or neglect
<input type="checkbox"/>	parent has not been involved with, has abandoned, or has voluntarily relinquished custody of the child	<input type="checkbox"/>	parent has not been involved with, has abandoned, or has voluntarily relinquished custody of the child

By signing below, I solemnly swear or affirm under penalty of perjury that the statements I have made or information I have provided on and in connection with this form are true and accurate to the best of my knowledge and belief. I understand and acknowledge that if I knowingly make any statement or provide any information that is false, I will be subject to criminal penalties.

Applicant Name (Printed)

Applicant Signature

Date

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



Request for a Child Protection Register (CPR) Check

The purpose of the Child Protection Register is to protect children and to ensure their safety by maintaining an index of perpetrators of child abuse and neglect in the District of Columbia. Authorized individuals may request background checks to establish whether an individual has a record of substantiated abuse or neglect of a child that occurred in the District of Columbia.

- ▶ To request a local police clearance for the District of Columbia, please visit <https://mpdc.dc.gov/node/187552>.
- ▶ For information about the Sex Offender Registry, visit: <https://mpdc.dc.gov/service/sex-offender-registry>.
- ▶ If you are making a request on behalf of a state child welfare agency outside of the District of Columbia and need the history of a family previously living in the District of Columbia, you may call **202-671-SAFE**.
- ▶ For other questions, call the CPR Unit at **202-727-8885** between 8:30 am and 4:30 pm Monday through Friday.

Read all instructions – incomplete, incorrect or illegible forms will be returned and your request may be delayed

- Do not complete an old version of the form; get the latest form at <https://cfsa.dc.gov/service/background-checks>.
- Mail or hand deliver original application; no photocopied, faxed, emailed, or scanned applications accepted.

Part I

- Schools (other than DCPS), child care facilities, private foster care agencies, and other private, community-based organizations should select “Non-Government Organization” as the Requestor Type. *Child care providers in the District should also check “+ OSSE”.*
- CPR check results are not transferrable and cannot be shared from one agency or employer to another.

Part II

- If you have no middle name, write “no middle name” or if a middle name is an initial, indicate “initial only.”
- If the answer to any question is none, write “N/A”.

Part III

- An individual must sign the form to provide consent for CFSA to release information to an authorized requestor.
- The form must be signed by hand; electronic signatures are not permitted.
- An employment request allows access to substantiated reports of child maltreatment, to OSSE or chief executive officers or directors of child care centers, schools, or any public or private organization working directly with children, for the purpose of making employment decisions.

Part IV

- Forms will be returned unprocessed if they are not notarized (*Note: applications for CFSA foster/adoptive/kinship caregivers need not be notarized, but photo ID must be provided and the form must be signed in the presence of a CFSA employee*).

Part V

- Self-check applications must be submitted in person, not by mail.
- Individuals requesting a self-check and CFSA foster/adoptive/kinship caregivers must present **one** non-expired, government-issued, photo identification: e.g., driver’s license, state identification card, passport, “green card”.
- Results of CPR self-checks may not be used for employment purposes. Employers must directly request CPR clearances for prospective or current employees.

MAIL or HAND DELIVER completed forms to:	Attn: Child Protection Register Unit Child and Family Services Agency 200 I Street SE, 3rd Floor Washington, DC 20003	Applications accepted in person between 8:30 am and 4:30 pm Monday through Friday except holidays
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Please **type** or **print** clearly. Sign the form and date where indicated. Thoroughly review and submit to the CFSA CPR office. **Allow up to 30 business days** for results to be processed. Expedited requests will be considered on a case-by-case basis. **Forms will be returned** if incomplete, incorrect, or illegible resulting in a delayed response.

Hand delivery of this form is the fastest way to obtain results.

PART I: Requesting Organization/Employer Information

Request Date		Corrected Application Re-submission Date	
Requestor Type			
<input type="checkbox"/> Court	<input type="checkbox"/> Government Agency	<input type="checkbox"/> Non-Government Organization <input type="checkbox"/> + OSSE	<input type="checkbox"/> Self (<i>personal use only</i>)
Purpose			
<input type="checkbox"/> Court Request	<input type="checkbox"/> Adoption	<input type="checkbox"/> Visitation	<input type="checkbox"/> Foster/Adoptive/Kinship Home Licensing
<input type="checkbox"/> Current Employee/Volunteer	<input type="checkbox"/> New Hire/Volunteer	<input type="checkbox"/> Other:	
Requesting Organization/Employer Contact Information (results cannot be mailed to a P.O. Box)			
Attention To			
Requesting Organization			
Requestor Address			
Requestor Phone #		Fax	Email
Preferred method for receiving CPR check results		<input type="checkbox"/> Mail	<input type="checkbox"/> Fax
		<input type="checkbox"/> Email (encrypted)	<input type="checkbox"/> OSSE Box

PART II: Applicant Information

Last Name (include suffix if applicable)	First Name	Full Middle Name (write "no middle name" if there is none)	
Date of Birth (MM/DD/YYYY)	Social Security Number (or USCIS/Alien Registration #)	Gender (on birth certificate)	
		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Other Names Used (nicknames, alias, maiden name, previous married name, legal name change, etc.)			

Household Information. List all persons living at the current address with the applicant (including students away at college).

Name (first name, middle name, last name)	Date of Birth	Relationship to Applicant

PART III: Applicant Consent

I hereby consent and authorize the D.C. Child and Family Services Agency to provide the Requestor (noted in Part I) information concerning me that is contained in the Child Protection Register (“CPR”).

- Do not sign until you are in the presence of the Notary or your CFSA worker
- Must be signed by hand; electronic signatures are not permitted

Printed Name: _____

Signature: _____

Date: _____

PART IV: Certificate of Acknowledgement of the Applicant before a Notary Public

(Notary not required if this application is for a Self-Check or CFSA Foster/Adoptive/Kinship Caregiver – skip to PART V)

Leave this space blank for Notary seal

Subscribed and affirmed or sworn to me, in my presence, on this _____ day of _____, 20____

Signature of Notary Public: _____ in the state of, _____

My commission expires on ____/____/____

PART V: Self Check, CFSA Foster/Adoptive Parent, and CFSA Kinship Caregiver Verification

CFSA USE ONLY: Identification has been shown to me that I have deemed satisfactorily identifies the applicant:

Type of ID		ID #	
CFSA Employee Name (print)			
CFSA Employee Title (print)			
CFSA Employee Signature			