Child's Name:	_ DOB:	_ Date:
School Attending:		

## DIVISION OF FAMILY SERVICES ADOPTION/GUARDIANSHIP BOARD EXTENSION AGREEMENT

Dear Adoptive Parent or Guardian:

Your c	hild may	y cui	rrently n	neet the	guideli	ines of c	ur poli	cy to ext	end b	oard	<mark>l pa</mark> yme	ents	
after th	eir 18 <sup>th</sup> 1	birth	nday to c	complet	e high s	school o	r anothe	er DFS a	pprov	ved e	educatio	on	
progr <mark>a</mark> i	n (GED	). *	Accordi	ng to in	ıformati	ion prov	ided by	your ch	ild's	high	school	and	l
recent	annual r	enev	wal, whi	ch is pr	ovided,	he/she	is sched	luled to	comp	lete t	their ed	<mark>uc</mark> at	tion
by			*Thi	s extens	sion is	good for	r only 1	year ai	nd <u>wi</u>	ll no	t be re	new	ed.

DFS will continue to support your child as long as the following conditions are met:

- He/she is passing his/her classes (must supply report cards\*).
- He/she is not involved in criminal activity.
- He/she is following the rules of the adoptive home.
- He/she is not over the age of 21.

\*For youth who will not be able to graduate high school within one year after the school year in which the youth turned eighteen, the adoption or guardianship case will be closed. When the youth reaches their 18<sup>th</sup> birthday and withdraws, disrupts or is failing to make educational progress, the Division will discontinue its extended board services.

The board extension will begin on \_\_\_\_\_ and will be reviewed <u>no later than</u> the receipt of report cards requested from above\*. Whether the youth is in high school or another education program (GED), the review date is the midpoint for the current year or program. The Division of Family Services <u>does not</u> continue board payments while your child attends a post-secondary education facility nor does it continue payments past their 21<sup>st</sup> birthday.

Completing one's education and preparing for independence should be your child's primary focus over the next months.

Please sign below and return to the Adoption office that you understand what is expected during this board extension.

If you have any questions at any time, please contact me.

Child's Name:	DOB:	Date:	

## -Continued-

We wish your child much success in completing their education!

Student's Signature Date

Adoptive Parent/Guardian Signature Date

Adoptive Parent/Guardian Signature Date

Adoption Assistance/Subsidy Specialist Date