The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Children and Families
600 Washington Street, 6th Floor
Boston, MA 02111
Tel.: 617-748-2000 Fax: 617-261-7435
www.mass.gov/dcf

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

LINDA S. SPEARS
Commissioner

2021-2022 Foster Child Grant Program Conditions of Agreement

I, _____, hereby certify that I am enrolled in a post secondary educational program. The full name
(Name)
of the school I am attending is _____and the address of the school is
(Name of School)
_____. My start date this academic year is month____ year_____.
(Address of School)

Students agree to the following statements in order to meet eligibility requirements:

- I am a full time student and under age 25 years old.
- I have filed a *2021-2022 FAFSA- Free Application for Federal Student Aid.* (The FAFSA website is www.fafsa.ed.gov)
- I am currently a permanent resident of the Commonwealth of Massachusetts. The FAFSA that I filed reflects a Massachusetts address.
- I have verified with DCF that I was in the custody of DCF through a Care and Protection Petition until my 18th birthday. (Youth who turned 18 in the custody of DCF may or may not have remained in DCF placement past their 18th birthday.)
- I agree to participate in educational support services offered to me by the Department of Children and Families.
- I am aware that for the purposes of awarding this grant, DCF will exchange the information I have provided on this form with the Massachusetts Office of Student Financial Assistance and the above named school where I am enrolled.

Please complete this form in its entirety or it could impact funding

_____ _____ _____
Signature of Student Printed Name Date

Social Security Number_____ Date of Birth_____ Phone Number_____

Address_____City_____ State MA Zip_____

Valid E-mail Address_____ (Required)

DCF Area Office_____

Have you applied for Foster Child Grant before? Yes_____ No_____

Filing deadline for academic year 2021-2022 is July 1, 2021
Students can return completed form by email or mail to:
Massachusetts Department of Children and Families
Adolescent Services Unit
600 Washington Street, 6th floor
Boston, MA 02111
Attn: Adolescent and Young Adult Services
ana.tormes@mass.gov

MASSACHUSETTS DEPARTMENT OF Children & Families