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|  | **Extended Foster Care Program****Voluntary Placement Agreement (VPA)** | PERSON IDENTIFICATION (ID) |
|  | DATE OF BIRTH |
| This Agreement is between  (youth’s name) and DCYF |
| 1. **The Youth Certifies:**
	* I had an open dependency on my 18th birthday and have not reached the age of 21 or older.
	* I understand that the law requires me to be under the “placement and care authority” of DCYF and, within 179 days of signing this agreement, to be found as a non-minor dependent in a juvenile court proceeding.
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| 1. **DCYF will assist the youth with:**
* Making ongoing progress completing identified goals in my case plan, which may include education, vocation, employment, and other skills needed for independence.
* Being involved in decisions about my case and, if I do not already have an attorney, one will be assigned to me by the court to help me through the court process.
* Comply with all dependency court orders (for example, participate in services provided to assist in my transition).
* Complying with any placement rules.
* Not ~~l~~eaving my placement for more than 72 hours without permission.
* Meeting with my assigned social worker at least monthly to review my progress.
* If the Social Security Administration has determined that you are not capable of managing your benefits, then DCYF will apply for consideration to serve as your representative payee.
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| 1. **DCYF Agrees to:**
* Provide and support the placement or living situation, where authorized by law, and provide foster care services to the youth.
* Verify the youth’s participation in an educational / vocational / removing barriers activity / employment / medical condition.
* Continue to provide Independent Living Skills or transition services to the youth.
* Assist the youth in coordinating services with other administrations or agencies that offer benefits for which the youth is eligible.
* Review and update the case plan with the youth.
* Meet face to face with the youth at least one time each month.
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| 1. **This agreement will end when the youth:**
* Is ordered a dependent by the juvenile court giving DCYF placement and care authority over the youth, or
	+ No longer agrees to enter into Extended Foster Care
	+ The youth is age 21 or older.
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| SIGNATURE OF CLIENT | DATE |
| SIGNATURE OF DCYF CASE WORKER | DATE |
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