

Extended Foster Care Program Voluntary Placement Agreement (VPA)

PERSON IDENTIFICATION (ID)
DATE OF BIRTH

DATE

DATE

	(****)	
This /	Agreement is between (youth's name) and DCYF	
I. The Youth Certifies:		
•	I had an open dependency on my 18 th 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.	
II. D	CYF 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 leaving 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.	
III. D	CYF 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.	
IV. T	his 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.	

SIGNATURE OF CLIENT

SIGNATURE OF DCYF CASE WORKER

COPY TO: DCYF Case File Foster Parent Private Agency Staff DDA Social Worker