



## FOSTER CARE VERIFICATION

**Purpose:** Use this form to provide a youth or young adult with an official statement that they are or were in foster care through the Texas Department of Family and Protective Services (DFPS) . This form provides proof that the youth or young adult is currently in or was previously in foster care, which may be needed to access certain programs or benefits, for example, the waiver of Texas driver’s license fees or certain assistance with federal student aid.

**Directions:** DFPS or SSCC staff verifies the DFPS record of the youth or young adult, completes this form, and provides it to the youth or young adult.

For questions contact the [Preparation for Adult Living \(PAL\) program](#).

### FOSTER CARE VERIFICATION STATEMENT

Use an **X** to mark the appropriate box:

This form verifies that this youth or young adult is currently or was previously in foster care through the Department of Family and Protective Services (DFPS) as follows:

- The youth is currently under age 18 and is in the managing conservatorship of DFPS.
- The young adult is at least age 18 but under age 21 and resides in a foster care paid placement.
- The youth or young adult was in foster care at any time after their 13th birthday.
- The young adult left foster care at age 18 or older.

### INFORMATION ABOUT YOUTH OR YOUNG ADULT

Name:	Date of Birth:	Youth or Young Adult DFPS Person Identification Number (PID):
-------	----------------	---

### INFORMATION ABOUT DFPS STAFF MEMBER COMPLETING THIS FORM

Name:	Title:
Phone (with area code):	Email Address: <span style="float: right;">@dfps.state.tx.us</span>
Signature:  <b>X</b>	Date Signed: