## ADOPTION ASSISTANCE CONNECTIONS to AGE TWENTY-ONE (AAC) ACCEPTABLE FORMS of DOCUMENTATION

- Eligibility will be verified every 180 days.
- If all requirements are not met for corresponding Eligibility Requirement(s), AAC may be terminated.

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Adopted Child, now an Adopted Young Adult, must meet one of the	Documentation (5 and a second
Eligibility Requirements (1-5) <u>and</u> the adoptive parents must	(Examples, other documentation to be considered on a case by case basis).
provide proof of continued Parental Responsibility.	
<ul> <li>Enrolled in High School or a program leading to an equivalent credential.</li> <li>Enrollment in school to receive high school diploma</li> <li>Participating GED program</li> <li>Other institution/program by the Department of Education</li> </ul>	<ul> <li>Enrollment letter from school administration or guidance counselor</li> <li>Grade Report Card</li> <li>Class schedule</li> </ul>
<ul> <li>2. Enrolled in Post-Secondary Education</li> <li>College or university</li> <li>On-line studies that are affiliated with a licensed institution</li> <li>Vocational Program</li> <li>Technical Schools</li> <li>Work Study</li> <li>3. Employed for at least 80 hours per month.</li> <li>Regular Employment</li> <li>AmeriCorps</li> <li>Internship/Externship (Paid/ Unpaid)</li> </ul>	<ul> <li>Transcript</li> <li>Acceptance Letter</li> <li>Financial Aid Award Letter</li> <li>Letter from college/university Admissions Office</li> <li>Class Schedule</li> <li>Paystub</li> <li>Employer written verification</li> </ul>
4. Participating in Program to Remove Barriers to Employment  Work force preparation classes (CCMEP)  Job Corps  Job Skill Training Classes or Job Shadowing/Mentoring  Volunteering  Apprenticeship  Resume/Interview skills classes/training  Substance abuse/Mental health treatment  Domestic violence/date violence program  Parenting classes  Financial Management classes  Driver's education classes  ESL Classes	Written verification letter from program/activity that includes description of program/activity and its duration (e.g. sixweek program)
<ul> <li>5. Unable to participate in the activities detailed above due to a diagnosed physical or mental health condition documented by a qualified practitioner.</li> <li>Young Adult's condition may be short or long term.</li> </ul>	<ul> <li>Written verification from a qualified practitioner treating the applicant for a physical or mental health condition that prevents the applicant from participating in education or employment using the attached "Disability Verification Form" OR;</li> <li>A copy of the applicant's Social Security award letter effective within 180 days from the date of their application for AAC.</li> </ul>
<ul> <li>Parental Responsibility</li> <li>Documentation is required to verify ongoing parental responsibility</li> </ul>	<ul> <li>Receipts to show payment(s) on behalf of the young adult for rent, utilities, cell phone, tuition, clothing</li> <li>Tax return</li> <li>FAFSA (must be dependent)</li> </ul>