

Community User Guide

Table of Contents

Introduction	3
What is OAGP?	3
Things you may need before you get started	3
Creating an Account with MyOhio	3
Creating An Application	7
Adoptive Parent(s) Information	3
Adoptive Child's Information10)
Documentation to be Attached/Upload10)
W-9 Form (completed for Payee Only)12	2
Identification Forms	3
Foster Caregiver Adoption	3
Special Needs Adoption	4
Affirmation14	4
Editing/Revising an Application 16	3
Application Process Next Steps: 17	7
Award amount and payment ۱٤	3
Help	3
Live Chat ۱٤	3



Introduction

Congratulations on expanding your family through adoption and thank you for being an adoptive parent in the State of Ohio! This user guide will explain the steps to complete an application for the Ohio Adoption Grant Program.

What is OAGP?

OAGP stands for the Ohio Adoption Grant Program. This grant allows adoptive families to apply for a one-time payment per adopted child. On this portal, an applicant will upload all required documentation and view or edit an existing application for the program.

Things you may need before you get started

- 1. A certified copy of your finalized adoption decree from the Court.
- 2. Two forms of identification for the adoptive parent who will be receiving payment (Photo ID, Social Security Card, Passport, etc.).
- 3. Completed and signed IRS form W9 (for adoptive parent payee only).
- 4. If applicable, proof of foster placement prior to adoption. This can be the <u>Ohio Adoption</u> <u>Grant Agency Letter</u> (found at the end of this document).
- 5. If applicable, an <u>Ohio Adoption Grant Program Special Need Documentation (Form JFS 1058)</u> completed and signed by a qualified professional (Instructions on completing this form can be found <u>here</u>).

*Note: Any outstanding child support will be deducted prior to your award payment being issued.

Creating an Account with MyOhio

- 1. Go to the webpage: <u>https://fosterandadopt.jfs.ohio.gov/adoption/grant</u>.
- 2. Click launch button.
- 3. On the MyOhio.gov login page, click the **Create Account** button.
- 4. The **Create OH**|**ID Account** page will appear. Enter in your e-mail address, re-enter the same e-mail address in the second box, then click the **Send PIN** button.
- 5. The **E-mail Verification** page will appear, stating an e-mail with a one time PIN has been sent to your account.

	H ID One State. One Account.
	Account
Log In	
оңір	
Password	ø
La	ogin
Forgot OH ID? Forgot p	oassword? Get login help

Find out more about OH ID >



⊖OH ID		OHID Email Verification PIN Hello, Please enter the following one-time PIN to verify your email. This code will exprice in 5 minutes.		OH ID	
Create OH/ID Account Teamit Verification Personal Info Picka Username Create Password Account Recovery	Email Verification Web one OnlyDe account, you can sign is the multiple State of Oho agency systems more securely. You need an active email address to consist and OND account. Need to create cond Comparises such as Sporter. More and Address are used and OND account. All the multiple State of OND account. A one time PN will be enailed to the term and address your provide better. The med address you provide better. Dear Address Cenferm Enail Address to mail granulation manifermaticism Cenferm Enail Address to mail granulation	Market is similarity of the second of the se	•	Create CH/ID Account	Email Verification An and the average free Network was to constigened cons
6 Terms & Conditions	Cancel Send PM				Cancel Next

- 6. Enter the **PIN** received in the e-mail, then click the **Next** button.
- 7. Enter in your **Person Info**, including Legal First Name, Legal Last Name, Date of Birth, Last 4 digits of SSN (optional), then click the **Next** button.

90H ID			
Create OH ID Account	Personal Info		
Email Verification	Legal First Name	Legal Last Name AdoptiveMom	
2 Personal Info	Date of Birth	Last 4 digits of SSN (optional)	
3 Pick a Username	Be sure to use your real date of birth, you may need it for		
4 Create Password	account recovery later.		
5 Account Recovery			
6 Terms & Conditions			
	Cancel		Next

8. **Pick a Username** by entering in a value that you will easily remember, then click the **Next** button.

Create OH ID Account	Pick a Username	
_	Username Requirements	
2 Email Verification	Must be between 6-64 characters	
Personal Info	Cannot start or end in a special character Cannot contain only numbers	
3 Pick a Username	Only or @ No other special characters	
3 Pick a Username	Username	
4 Create Password	annadoptivemom	
5) Account Recovery		
6) Terms & Conditions		

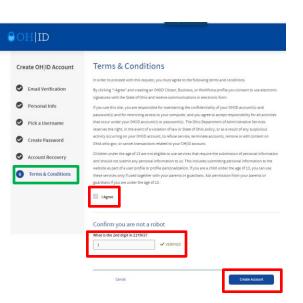
9. **Create A Password** that is easy for you to remember, but difficult for others to guess. Confirm the password by entering it a second time, then click the **Next** button.

10. *Optional*: Provide a Mobile Number for easier account recovery in the future, then click **Send PIN.** Otherwise, click <u>skip this step</u>.

11. Read through the **Terms & Conditions** and click the box next to **I Agree**. Confirm you are not a robot by answering the question asked at the bottom of the screen. A **VERIFIED** prompt will display if answered correctly. Then, click **Create Account**.

⊖OH ID	
Create OH ID Account	Create Password
Email Verification	Password Requirements Must have at least 8 and no more than 30 characters in length Must contain 1 character from each of the following categories:
Personal Info	 Upper case letters (A-Z) Lower case letter (a-Z)
Pick a Username	o Numbers (0-9) o Special characters (15#, %⊕~^&*+≈><0(][]%%∞,\?')
Create Password	Cannot include your first name, last name, username, or OH[ID Example: If your name or username is John Smith, your password cannot contain "John" or "Smith"
5 Account Recovery	Password Confirm Password
6 Terms & Conditions	
	Cancel Next

OH ID	
Create OH ID Account	Account Recovery
Email Verification	Your email () is the main way you'll reset your password. Adding your mobile number to your account ensures that we have a way to reach you if you lose access to your email.
Personal Info	Set up mobile/text message account recovery You will receive a PIN via text message. Message and data rates apply. See Terms & Conditions and
Pick a Username	Privacy.Policies. Mobile Number
Create Password	555-555-5555 Send PIN
5 Account Recovery	If you choose not to add your mobile number to your account at this time, you can skip this step.
6 Terms & Conditions	
	Cancel Next





Department of Job and Family Services

12. You'll receive a confirmation screen which indicates that your account is being created, and to check your email for details. Click on log in to OH|ID once you receive that e-mail. If you do not receive it in your inbox, please check your spam folder.

13. The e-mail received will confirm creation of your **OH**|**ID** account

OH ID Create OH/ID Account Check your Email We are working to create your new OH/ID account. This may take a few seconds or a few millow and posterior on the mail email gemeat com OH(D: aenadoptivemon) Email Verification Origo receive a confirmation email, return here to log in 10 OH(D). Pick a Username

Create Password

Account Recovery

Confirmation

Your new OH|ID account has been created

Welcome to OH|ID. This email confirms you created an OH|ID account for:

Name: Ann AdoptiveMom OH|ID: annadoptivemom Email: <u>@hotmail.com</u>

Return to your browser to continue to OH|ID login.

Please note, this email comes from a no-reply email address. Replies to this email are not monitored.

Create Account Create Account

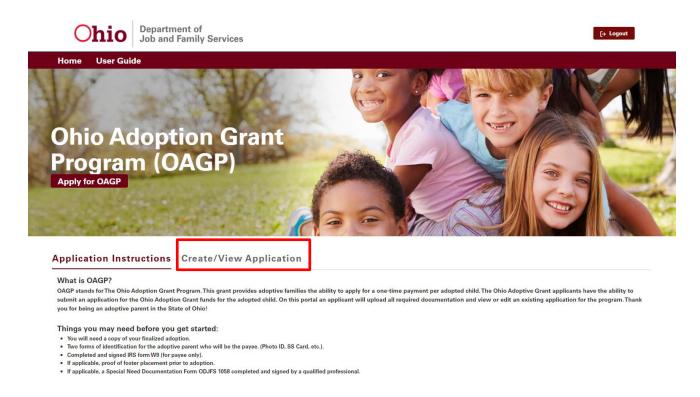
14. You may now enter your newly created **OH**|**ID** and **Password**. Click the **Log in** button.



Creating An Application

There are two tabs located on the main screen of the **Ohio Adoption Grant Program** portal. The first is the **Application Instructions**. Please read this page before applying so you are prepared for the materials you may need on hand, which are also listed at the beginning of this guide.

1. When ready, click on the tab for Create/View Application



2. The Welcome Screen appears, displaying any existing applications in the system for your account. Click on the **Start New Application** button.





Application Instructions Create/View Application

Welcome Carol	ine Hasting	s !					
Application Number	Child Name	Application Status	Payment Status	Payment Issued Date	Application Status Last Updated On	Created Date	View/Edit
OAG-00048	yoseph Hastings	Submitted For Approval			Nov 14, 2023	Oct 31, 2023	
OAG-00047	Zanni Hastings	Submitted For Approval			Nov 14, 2023	Oct 31, 2023	
OAG-00046	Clara Hastings	Submitted For Approval			Oct 31, 2023	Oct 12, 2023	
OAG-00045	Child Two	Denied			Oct 3, 2023	Sep 26, 2023	
OAG-00044	Child One	Payment locued			Oct 4 2023	Διια 17 2023	⊘ View

Adoptive Parent(s) Information

Note: Payee/Parent 1 will be the individual completing the IRS Form W-9.

- 1. Enter the requested information. **Important:** All values marked with a red asterisk * are required.
 - First Name*

•

•

•

Middle Name

Last Name*

Gender*

- Social Security Number*
- Date of Birth*
- Ethnicity *

- Race*
- Email*
- Phone Number*

ADOPTIVE PARENT(S	6) INFORMATION		Steps
		e the applicant that will be completing the ayer Identification Number and Certification."	ADOPTIVE PARENT(S) INFORMATION
Payee/ Parent 1 Ir	nformation		 ADOPTIVE CHILD'S INFORMATION
* First Name	Middle Name	* Last Name	DOCUMENTATION TO BE ATTACHED/UPLOAD
* Social Security Number	* Date of Birth (mm/dd/yyyy)	ä	• W-9 FORM
* Gender	* Hispanic/Lat		IDENTIFICATION FORMS
	•	•	FOSTER CAREGIVER ADOPTION
	n Native 🔲 Asian 🗌 Black/African Americ; /hite 🔲 Multi-racial (one or more races unkn		SPECIAL NEEDS ADOPTION
Unknown I do not wish Error:Race is required.			AFFIRMATION



2. Click the box next to **Add Second Parent**, if applicable. The page will display **Parent 2 Information (Optional)**. Fill in the requested data for **Parent 2**.

* First Name	Middle Name	* Last Name
Social Security Number	* Date of Birth (mm/dd/yyyy)	
		苗
Gender	* Hispanic/Latino	
	•	
Race		
	tive 🔲 Asian 🔲 Black/African American 🔲 Native Hawa	aiian 📘 Other Pacific Islander 📘 White

3. Enter **Payee Address (Note:** The address should match the photo ID provided, otherwise, additional proof of residency will be required.)

For tax purposes, please provide the address of the applicant that is completing the United States internal revenue service (IRS) form W-9, "Request for Taxpayer Identification Number and Certification.".

Payee Address	
* Address	
Address Line2	
* City	
* County	
	•
* State	
Ohio	
* Zip Code	
Go Back To Home Screen	Next

- 4. Click the **Next** button OR click **Go Back To Home Screen**
- 5. The system will present an error message in red if there is any missing information on this page, or if the name of the payee does not match one of the Adoptive Parents.



Adoptive Child's Information

1. Enter the requested information for the **Adoptive Child**. **Important:** All values marked with a red asterisk * are required.

•

•

Gender*

Race*

Ethnicity*

- First Name*
- Middle Name
- Last Name*
- Social Security Number*
- Was this a Step-Parent Adoption*

- Type of Adoption*
- Date Adoption Finalized*

- Date of Birth*
- 2. Click **Next** to proceed to the **Documentation to be Attached/Upload** section, click Previous to return to the **Adoptive Parent(s) Information**.

Adoptive Child's Inf	formation		ADOPTIVE PARENT(S) INFORMATION
* First Name of Adoptive Child	Middle Name of Adoptive Child	* Last Name of Adoptive Child	ADOPTIVE CHILD'S
* Social Security Number	* Date Of Birth	1	
		曲	ATTACHED/UPLOAD
* Gender	* Hispanic/Lat	ino	
	•	1000	W-9 FORM
🗌 American Indian 🔲 Alaskan N	Native 🔲 Asian 🗌 Black/African America		
	Native 🔲 Asian 📄 Black/African Americ: te 📄 Multi-racial (one or more races unkn	an 🗌 Native Hawaiian	
American Indian Alaskan N Other Pacific Islander Whit Unknown I I do not wish to Error:Race is required.	Native 🔲 Asian 📄 Black/African Americ: te 📄 Multi-racial (one or more races unkn	an 🗌 Native Hawaiian	IDENTIFICATION FORMS FOSTER CAREGIVER ADOPTIO
American Indian Alaskan N Other Pacific Islander Whit Unknown I I do not wish to Error:Race is required.	Native 🔲 Asian 📄 Black/African Americ: te 📄 Multi-racial (one or more races unkn	an 🗌 Native Hawaiian Nown) 📄 Multi-racial (all races unknown)	
American Indian Alaskan N Other Pacific Islander Whit Unknown I I do not wish to Error:Race is required. * Type of Adoption	Native 🔲 Asian 📄 Black/African Americ: te 📄 Multi-racial (one or more races unkn	an 🗌 Native Hawaiian Nown) 📄 Multi-racial (all races unknown)	
American Indian Alaskan N Other Pacific Islander Whit Unknown I I do not wish to Error:Race is required. * Type of Adoption	Native 🔲 Asian 📄 Black/African Americ: te 📄 Multi-racial (one or more races unkn	an Dative Hawaiian lown) Multi-racial (all races unknown)	

Documentation to be Attached/Upload

- 1. In this section, you will need to upload a copy of your final adoption order, interlocutory order or adoption or recognition of adoption by this state under <u>section 3107.18</u> of the Revised Code.
- 2. Select the type of document you will be uploading in the **All Grant requests** drop-down box.



3. Click on the **Upload Files** button or drag the file into the section.

DOCUMENTATION TO BE ATTACHED/UPLOAD	S	teps
Please upload the final adoption order, interlocutory order of adoption or recognition of the adoption by this state under section 3107.18 of the Revised Code.	0	ADOPTIVE PARENT(S) INFORMATION
All Grant requests (select any one): Final adoption order		DOCUMENTATION TO BE ATTACHED/UPLOAD
All Grant Request Documents <u> <u> </u></u>		W-9 FORM
		IDENTIFICATION FORMS
Go Back To Home Screen Previous Next		FOSTER CAREGIVER ADOPTION
		SPECIAL NEEDS ADOPTION
		AFFIRMATION

4. Select the location of the file you wish to attach, then click **Open**.

Open					×
- → ✓ ↑ 📜 > This PC > Desktop > Important	Documents	~	Ö		rtant Documents
Organize 👻 New folder				1==	• 🔳 🕜
Training & Help ^ 🗌 Name	Stat	us Date mo	dified	Туре	Size
📕 Training BA Worl 🛛 🖓 🕮 Final Order of Adopt	ion 😂	3/20/202	3 9:34 AM	Microsoft W	Vord D
Videos					
Whiteboards					
This PC					
3D Objects					
Desktop					
E Desktop					
Desktop					
Desktop Documents Downloads					
Desktop Documents Downloads Music					
Desktop Documents Downloads Music Pictures Videos					
Desktop Documents Downloads Music Pictures					
Desktop Documents Downloads Music Pictures Videos SODisk (C:) V <					
Desktop Cocuments Downloads Music Pictures Videos Solbisk (C:)			~	All filer	

5. A confirmation screen indicating the document has been successfully uploaded with a green check should appear. Click **Done**.

Uploa	d Files	
Final Order of Adoption.docx 12 KB	O	
1 of 1 file uploaded	Done	

6. Click the **Next** button to proceed to the **W-9 Form** section or click **Previous** to return to the **Adoptive Child's Information** section.



DOCUMENTATION TO BE ATTACHED/UPLOAD	Steps
Please upload the final adoption order, interlocutory order of adoption or recognition of the adoption by this state under section 3107.18 of the Revised Code.	ADOPTIVE PARENT(S) INFORMATION ADOPTIVE CHILD'S INFORMATION
All Grant requests (select any one): Final adoption order	O DOCUMENTATION TO BE ATTACHED/UPLOAD
All Grant Request Documents	• W-9 FORM
Final Order of Adoption.docx	IDENTIFICATION FORMS FOSTER CAREGIVER ADOPTION
Go Back To Home Screen Previous Next	 SPECIAL NEEDS ADOPTION
Go Back To Home Screen Previous Next	SPECIAL NEEDS ADOPTION AFFIRMATION

Note: If you wish to delete the uploaded document, click the trash can icon next to the record. The following confirmation message will appear. Click **Delete** to finish removing the document or **Cancel** to retain the document.

Delete Document	
Deleting a document will remove the document from the current application.	
Are you sure you would like to delete the document?	
Cancel	Delete

W-9 Form (completed for Payee Only)

- 1. Complete a United State Internal Revenue Service (IRS) form <u>W-9 Request for Taxpayer</u> <u>Identification Number and Certification</u> and save it/scan it to your computer.
- 2. Choose **Yes** from the drop-down box indicating **A completed W-9 form**.
- 3. Click **Upload Files** or drop the saved file into the box.
- 4. Click **Next** to proceed to the **Identification Forms** section or **Previous** to return to the **Documentation** section.



W-9 FORM	This is a Required Document for the Grant Appliaction
Instructions: Please upload a completed and signed, United States Internal Revenue Service (IRS) form W-9, "Request for Taxpayer Identification Number and Certification." For tax purposes, please provide the residential address of the applicant on the United States Internal Revenue Service (IRS) form W-9, "Request for Taxpayer Identification Number and Certification."This form must match the person whose information is provided in the Payee/Parent 1 section.	Steps C ADOPTIVE PARENT(S) INFORMATION C ADOPTIVE CHILD'S INFORMATION
Tip: When naming your saved document, please name the document by inserting your last name before W9 Form. (Example: Smith W9). This will help to prevent any issue uploading your document. * A completed W-9 form	DOCUMENTATION TO BE ATTACHED/UPLOAD W-9 FORM
Yes ▼ Completed w-9 Form ♪ Upload Files Or drop files	IDENTIFICATION FORMS FOSTER CAREGIVER ADOPTION SPECIAL NEEDS ADOPTION
Go Back To Home Screen Previous Next	AFFIRMATION Agent Offline

Identification Forms

- You will need to provide two forms of current identification for the payee identified as Adoptive Parent 1 who is submitting the W-9 form. This can include a driver's license or State ID and a Social Security Card. Driver's License or State ID is used to verify you as an Ohio resident. The address(es) should match what has been entered as Payee's Address.
- 2. Click **Upload Files** or drop the saved file into the box.
- 3. Click **Next** to proceed to the **Foster Caregiver Adoption** section or **Previous** to return to the **W-9 Form** section.



Foster Caregiver Adoption

 If your adopted child was fostered by you prior to adoption finalization, upload documentation of their foster placement in this section. This can be your **Ohio Adoption Grant Agency Letter** or other documents you can obtain from the Public Children Services Agency who assisted with the adoption finalization.



- 2. Answer Yes or No if this was an Adoption by Foster Caregiver.
- 3. If **No** is answered, you may proceed to the **Next** section
- 4. If **Yes** is answered, click the **Upload Files** button or drop the saved file(s) into the box.
- 5. Click **Next** to proceed to the **Special Needs Adoption** section or **Previous** to return to the **Identification Forms** section.

FOSTER CAREGIVER ADOPTION	Steps
Please upload documentation of fostering this youth prior to adopting. Please seek assistance from the Public Children Services Agency (PCSA) or Private Child Placing Agency (PCPA) that held custody of the child prior to adoption. (if not applicable, click next to continue)	ADOPTIVE PARENT(S) INFORMATION
	ADOPTIVE CHILD'S INFORMATION
Adoption by Foster Caregiver (if you are requesting a \$15,000 grant payment) Yes	OCUMENTATION TO BE ATTACHED/UPLOAD
Attach documentation with paperwork indicating adoptive parent cared for the adopted child prior to the adoption	W-9 FORM
the for Auoption by rospir Caregiver ●	IDENTIFICATION FORMS
ICCA Foster.docx 💼	• FOSTER CAREGIVER ADOPTION
	SPECIAL NEEDS ADOPTION
Go Back To Home Screen Previous Next	AFFIRMATION

Special Needs Adoption

- 1. If applicable, complete a **JFS Form 01058 Ohio Adoption Grant Program Special Needs Documentation** and save it to your computer.
- 2. Answer **Yes** or **No** if this was a **Special Needs Adoption**.
- 3. If **No** is answered, you may proceed to the Next section
- 4. If **Yes** is answered, click the **Upload Files** button or drop the saved file(s) into the box.
- 5. Click **Next** to proceed to the **Affirmation** section or **Previous** to return to the **Foster Caregiver Adoption** section.

SPECIAL NEEDS ADOPTION	Steps
Please upload the "JFS form 01058 Ohio Adoption Grant Program Special Needs Documentation." Form linked on this website. (if not applicable, click next to continue)	ADOPTIVE PARENT(S) INFORMATION ADOPTIVE CHILD'S INFORMATION
Special Needs Adoption Yes	O DOCUMENTATION TO BE ATTACHED/UPLOAD
Attach JFS 0XXXX qualified professional who does not provide casework services to the adopted child diagnosed the child with one or more special needs in the professional's area of expertise prior to the final order of adoption, interlocutory order of adoption, or recognition of the adoption by this state under section 3107.18 of the Revised Code.	W-9 FORM IDENTIFICATION FORMS
Eile For Special Needs Adoption C Upload Files Or drop files	FOSTER CAREGIVER ADOPTION
JFS 01058.docx	SPECIAL NEEDS ADOPTION
	AFFIRMATION
Go Back To Home Screen Previous Next	

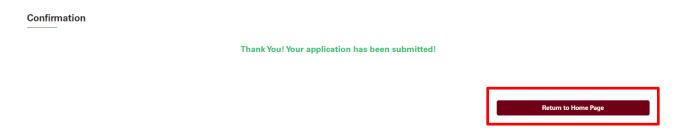
Affirmation

- 1. Read the Affirmation statement and click the radio button next to the sentence **I/we** also acknowledge that by clicking "Submit", I/we are electronically signing this application and will be held to all of the above acknowledgements.
- 2. Click the **Submit for Approval** button (or click **Previous** to review prior sections).

Steps **AFFIRMATION** Ø ADOPTIVE PARENT(S) INFORMATION · I/We affirm, under penalty of perjury, that the information given in this application is accurate • I/We understand that verification of a finalized adoption on or after January 1, 2023, and proof of residency in Ohio will be required • I/We understand that I/we must apply within one calendar year of my/our adoption finalization. Ø ADOPTIVE CHILD'S INFORMATION • I/We understand and agree that other persons or organizations may be contacted to obtain the necessary proof of eligibility. I/We understand that in some instances, I/we may be asked to give consent to make whatever contacts necessary to determine eligibility. Ó DOCUMENTATION TO BE ATTACHED/UPLOAD I/We acknowledge that approval is contingent upon the availability of state funds for this program. I/We understand that to be eligible for Ohio Adoption Grant funds, I/we am required to submit a copy a completed W-9 form, two forms of identification, and proof of a finalized adoption. If applicable, I/we W-9 FORM Ø may need to submit proof that I/we was a foster caregiver(s) to this child prior to adoption. If the child has a diagnosed special need, I/we will be required to submit a completed OAGP Special Needs Form (JFS 01058). IDENTIFICATION FORMS • I/We affirm that I/we have not previously received a grant payment from the Ohio Adoption Grant Program for the child I/we are submitting this application. I/We understand that all/portion of any grant awarded can be intercepted if I/we owe past child/spousal support. FOSTER CAREGIVER ADOPTION Ó • I/We understand that my application will be reviewed and once my eligibility has been determined, I/we will be contacted with a decision SPECIAL NEEDS ADOPTION Ò I/we also acknowledge that by clicking "Submit", I/we are electronically signing this application and will be held to all of the above acknowledgements. AFFIRMATION Previous Submit For Appro Go Back To Home Screen

3. A confirmation screen will appear if the application was successful. Otherwise, the system will prompt you to missing items from the application. Click **Return to Home Page** to continue.

Note: Once you have submitted an application, it can no longer be edited unless returned to you for corrections.



4. An email notification should also be received confirming your submission.



Thank you. Your Application (OAD-00009) for the Ohio Adoption Grant has been submitted and is under review. If you should need further assistance, please contact us at <u>OFC-Ohioadoptiongrant@ifs.ohio.gov ohio.gov</u> email address for OAGP here.



Editing/Revising an Application

 If you have started an application and are returning to it later, navigate to the Create/View Application tab and click on the Edit button to the right of the record, and pick up where you left off for completion. The Status will display as In Progress.

Application Instructions	Create/View App	lication			
Welcome Ann Adoptivel	Vlom!				
Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009		In Progress		Mar 17, 2023	💉 Edit
		🕒 St	art New Application		

2. Once you have submitted an application, you may view it by going to the **Create/View Application** tab and clicking on the **View** button to the right of the record. The **Status** will display as **Submitted for Approval**.

plication Instruction		olication			
Velcome Ann Adoptiv Application Number	EIVIOM ! Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009	Amir AdoptiveChild	Submitted For Approval	Mar 20, 2023	Mar 17, 2023	
		Start New Ap	plication		

3. If there is information missing from your application, you should receive an email notification indicating what still needs to be added to your application to process it.



The application **Status** will display as **Rejected**. The **Edit** button will be available to correct the missing items.



	I				
Velcome Ann AdoptiveN	viom !				
Annalise Alexa Misseria	Child Name	Status	Status Last Updated On	Created Date	View/Edit
Application Number					

4. To apply for a grant for another adopted child, click **Start New Application**.

elcome Ann Adoptiv					
Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009	Amir AdoptiveChild	Submitted For Approval	Mar 20, 2023	Mar 17, 2023	

Application Process Next Steps:

Once you submit your application, a State of Ohio employee will review your information. The reviewer can approve your application or reject your application.

A rejected application means that the reviewer could not approve it based on how it was submitted. If they reject it, they will add some comments and an e-mail will automatically be sent to you, detailing the reasons for the rejection and how you may correct it.

If the reviewer approves your application, it will be submitted to a supervisor for the next level of approval.

The supervisor can approve it, reject it, or deny it. If the supervisor rejects it, you will receive an e-mail with comments as to the reason.

If it is denied, the supervisor has determined that you do not meet the requirements for an adoption grant award. An e-mail will be sent with the reason as well.

If your application is Denied, it will reflect this in the Status column:

Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAG-00017	Jerry Smith	Denied	Mar 28, 2023	Mar 24, 2023	

You will have 30 days to re-submit your application to be reviewed again by another supervisor. To do this, next to your denied application, click the **View** button. There will be a button for you to use to re-submit for a second review. You will need to acknowledge the affirmations again before it can re-submitted. The decision on the second review is final.



Grant Application				
Application Status				
Denied	Second review is currently allowed.			
> Adoptive Parent Information				
> Adoptive Child's Information				
> Uploaded Files and Document Information				
> Affirmation				
Return to Home Screen	Resubmit for Second Review			

After your Second Review is submitted, you will receive an email to confirm your second request. The status of the application will also show **2nd Review Submitted**.

Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAG-00017	Jerry Smith	2nd Review Submitted	Mar 28, 2023	Mar 24, 2023	

Award amount and payment

Once your application is approved, you will be notified of the approved amount. Prior to the payment being issued, the payee will be screened for any outstanding child support owed. If child support is owed, that amount will be deducted from your award amount. You will be notified of your final awarded amount via email, prior to payment being sent.

Please note that due to the expected influx of applications and the verifications that must be completed to ensure adoption grants are awarded properly, this process will take time and may take a few months for payments to be sent.

Help

If you need additional information or assistance, please contact <u>OFC-</u><u>OhioAdoptionGrant@jfs.ohio.gov</u>.

Live Chat

It is expected that a **Live Chat** feature will be available on the Home page. However, the agent will only be able to help with how the application site works.

Live Chat agents will not be able to help with the content of your application (such as what you need to attach for each section) or provide any information about if you qualify for a grant or when payment can be expected. These questions would need to be directed to <u>OFC-OhioAdoptionGrant@jfs.ohio.gov</u>.





Department of Job and Family Services

Health & Human Services Office of Families and Children

Mike DeWine, Governor Jon Husted, Lt. Governor Matt Damachroder, Director

Ohio Adoption Grant Program:

A request has been received by _

_ who is applying for The Ohio Adoption Grant program to confirm the adoptive parent served as a foster parent caring for _____ prior to the adoption.

Our agency verifies the following:

First and Last Name of Adoptive Child:	
First and Last Name of Adoptive Parent(s):	
Placement Begin Date:	
Placement End Date:	

or

Please contact me at with any questions.

Sincerely,

30 East Broad Street Columbus, OH 43215 Jfs.ohio.gov

This institution is an equal opportunity provider and employer.

