



FOSTER CARE VERIFICATION

Purpose: Use this form to provide a youth or young adult with an official statement that he or she was in foster care through the Texas Department of Family and Protective Services (DFPS) at any time after his or her 13th birthday. This form may be useful for the youth or young adult if he or she needs to present proof that he or she was previously in foster care.

Directions: First, the caseworker or another DFPS staff member verifies the DFPS record of the youth or young adult. Then, the same staff member completes this form and gives it to the youth or young adult. If you have 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 was in foster care through the Department of Family and Protective Services (DFPS) as follows:

- He or she was in foster care at any time after his or her 13th birthday and left foster care because of adoption, family reunification, or emancipation.
- He or she aged out of foster care at age 18 or older.

INFORMATION ABOUT YOUTH OR YOUNG ADULT

Name:	Date of Birth:	DFPS Person Identification Number (PID):
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INFORMATION ABOUT DFPS STAFF MEMBER COMPLETING THIS FORM

Name:	Title:
Phone (with area code):	Email Address: @dfps.state.tx.us
Signature: X	Date Signed: