TUITION WAIVER FOR FOSTER CHILDREN

The University System of New Hampshire and The Community College System of New Hampshire are partnering with the New Hampshire Division of Children, Youth and Families to provide tuition waivers to eligible students, enabling them to obtain a program certificate, associate degree, or bachelor degree through either of these institutions of higher education. Each system will provide a maximum of 10 tuition/fee waivers to eligible students each year.

*** Students are required to apply for this assistance annually. ***

NH Tuition Waiver Program for Foster Children Program Eligibility Requirements
Applicant must be less than 23 years of age as of May 1st in the year that they are applying for a waiver and qualify within one of the following categories:

a) In state foster care for the immediate 6-month period prior to the youth’s 18th birthday
b) In state guardianship or custody at the time of the youth’s 18th birthday
c) Youth adopted while in state guardianship or adopted from the care, custody, and control of the department following a surrender of parental rights
d) In an out-of-home placement under the supervision of the division for juvenile justice services at the time of the youth’s 17th birthday

Additional information about this program and answers to frequently asked questions are located at:

http://www.dhhs.nh.gov/dcyf/adolescent.htm

The attached Application form and signature page must be completed and submitted to the New Hampshire Division of Children, Youth and Families. Preference is given to applications received before May 1st each year.

***Applicants are required to apply for Federal Student Aid (FAFSA). Please visit http://www.fafsa.ed.gov/ for information and to complete this process. Questions specific to this process can also be answered by the Financial Aid Office at the college you plan to attend. Failure to apply for FAFSA will result in an incomplete application and prevent eligibility for a waiver.

Additional Assistance may be available through the New Hampshire Charitable Foundation. Information is available at http://www.nhcf.org/.

PARTICIPATING COLLEGES AND WEB SITE LOCATIONS

The University System of New Hampshire and the Community College System of New Hampshire will each grant 10 awards annually through this program. Applicants are encouraged to apply to colleges within both institutions to increase the likelihood of being selected for this tuition assistance.

Please contact the college(s) of your choice to find out key information regarding application, registration, and enrollment deadlines.

**UNIVERSITY SYSTEM OF NEW HAMPSHIRE**
Granite State College - http://www.granite.edu/
Keene State College - http://www.keene.edu/
Plymouth State University - http://www.plymouth.edu/
University of New Hampshire - http://www.unh.edu/
University of New Hampshire, Manchester - http://manchester.unh.edu/

**COMMUNITY COLLEGE SYSTEM OF NEW HAMPSHIRE**
Great Bay Community College - http://www.greatbay.edu/
Lakes Region Community College - http://www.lrrc.edu/
Manchester Community College - http://www.mccnh.edu/
Nashua Community College - http://www.nashuacc.edu/
NHTI – Concord’s Community College - http://www.nhti.edu/
River Valley Community College - http://www.rivervalley.edu/
White Mountains Community College - http://www.wmcc.edu/

Approved individuals receiving a waiver will be notified by their college institution after consultation with the New Hampshire Division for Children, Youth and Families. Notification will be made prior to June 30th. Late awards may be provided for students attending colleges with rolling admissions.
TUITION WAIVER FOR FOSTER CHILDREN
Application Form

Eligibility requirements include full-time (12 credits or more per semester) enrollment in a program leading to a certificate, associates or bachelor’s degree at any New Hampshire public postsecondary institution.

For priority consideration for an award, this application must be received by DCYF by May 1st of each year. Completion of this application does not guarantee an award under this program.

After completion of Part I, forward the application AND signature page to:
Robert Rodler, Adolescent Program Specialist
Division for Children, Youth and Families, John H. Sununu Youth Services Center
1056 North River Road
Manchester, NH 03104
Email: rodler@dhhs.state.nh.us
Phone: (603) 419-0312

Part I: Please print or type responses.
Name of Applicant: ____________________________________________
First Name, M.I. & Last Name
Mailing Address: ________________________________________________
Permanent Legal Residence: ______________________________________
Email Address: ___________________ Phone Number: (____)____________
Date of Birth: _____/_____/______ Last 4 Digits of your Social Security Number: __________

Indicate your current status: (please check one)
☐ Currently attending college ☐ Have applied to college ☐ Other: __________________________

Indicate the Institution(s) you have applied to or are already attending. (Check up to four)
Remember you are required to meet each institutional financial aid filing deadline.

University System of New Hampshire
☐ Granite State College ______________________
☐ Keene State College
☐ Plymouth State University
☐ University of New Hampshire
☐ University of New Hampshire, Manchester

Community College System of New Hampshire
☐ Great Bay Community College
☐ Lakes Region Community College
☐ Manchester Community College
☐ Nashua Community College
☐ NHTI – Concord’s Community College
☐ River Valley Community College
☐ White Mountains Community College

Did you receive the Tuition Waiver for Foster Children last year: ☐ Yes ☐ or ☐ No

Name/Address/Email of living parent/guardian or individual with whom you maintain the most contact:
______________________________________________________________________________
TUITION WAIVER FOR FOSTER CHILDREN

Signature Page

I declare, under penalty of perjury, that the answers on my current application form are true and correct to the best of my knowledge and belief.

If selected to receive a tuition waiver I, (or the Parent/Legal Guardian of this student who is under 18 years of age) authorize the New Hampshire Division For Children, Youth and Families to access my postsecondary educational records so as to determine my level of educational achievement as a participant in this program.

I give permission for the New Hampshire Division of Children, Youth and Families to provide the University System of New Hampshire and/or the Community College System of New Hampshire with verification of my eligibility status for the Tuition Waivers for Foster Children Program.

I further give permission to the University System of New Hampshire and/or the Community College System of New Hampshire to exchange financial aid information with the New Hampshire Division for Children, Youth and Families specific to this student.

FAFSA REQUIREMENT: An application for Federal Student Aid (FAFSA) must be completed each year. If FAFSA is not submitted to your school(s) of choice, your application will be incomplete and you will not be eligible for a waiver. Information and process located at: http://www.fafsa.ed.gov/

Date FAFSA submitted: ____/____/____
School(s) indicated: ____________________  ____________________  ____________________

Additional assistance may be available through the New Hampshire Charitable Foundation. Public charity makes grants and loans to fund projects that improve the quality of life for New Hampshire citizens in their communities. Use the following link to see if they have a scholarship that you would be eligible to apply for. Information is available at http://www.nhcf.org/.

The Division of Children, Youth and Families certifies that the above named applicant meets the eligibility requirements of the Tuition Waiver for Foster Children Program as stated in Pos 1401.01(c).

_______________________________________________________________  ________________________
Signature of Applicant or Legal Guardian if Applicant is Under Age 18  Date

_______________________________________________________________  ________________________
Signature and Title of Certifying Authority  Date

DHHS-DCYF Scholarship Application Revised 11/2013