



**FOSTER CARE VERIFICATION**  
 NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES  
 CHILDREN AND FAMILY SERVICES DIVISION  
 SFN 1612 (7-2019)

Foster care verification must be completed by the foster care case manager on all youth over the age of 14 prior to their discharge from care. Foster care verification provides documentation of the youths time in the ND foster care system. This verification may assist the youth in receiving a college scholarship, entry into the Chafee program as a Foster Care Alumni, access to North Dakota Medical Services, re-entry into 18+ continued care, etc. A youth can request a new Foster Care Verification (SFN 1612) at any time to use as verification in their future.

**YOUTH INFORMATION**

Name of Youth		Date of Birth	FRAME/Agency Case Number
Foster Care Entry Date	Foster Care Discharge Date	Length of Time in Foster Care	
Date of Adoption (if applicable)		Date of Kinship Guardianship (if applicable)	
Date of High School Graduation or GED Obtainment			

**AGENCY INFORMATION**

Name of Agency with Custody	
Form Completed By	
Telephone Number	Email Address

**AGENCY STAFF**

Signature	Date
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Given To:

- Case File
- Youth
- Chafee Transition Coordinator (if applicable)
- Other: \_\_\_\_\_