

# 2017 – 2018 Maryland Foster Care Tuition Waiver Form

Student Financial Aid Office  
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The Maryland Tuition Waiver for Foster Care Recipients is available to foster care youth who have completed the FAFSA, are under 25 years old, are enrolled in a vocational certificate program or as a degree-seeking student, and are meeting the Satisfactory Academic Progress standards at a Maryland Public institution of higher education. The purpose of Tuition Waiver for Foster Care Recipients is to provide financial assistance to foster care youth.

Student Name: \_\_\_\_\_ HCC ID \_\_\_\_\_

You may be exempt from paying tuition and mandatory fees at HCC. The tuition waiver only applies to **tuition and fees**. The tuition waiver does not apply to room and board, books, or other expenses incurred as part of the overall cost of attendance.

In order to be eligible for the MD TUITION WAIVER FOR FOSTER CARE RECIPIENTS, your name must be on the Department of Human Resources (DHR) list of eligible foster care students that is sent to public colleges and universities in January and July.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To the DHR Foster Care Case Worker, please answer the questions below and sign this form.

The above named student has been placed in out of home placement by the Maryland Department of Human Resources and either:

A. Resided in an out of home placement in Maryland at the time they graduated from high school or successfully completed a general equivalency development examination (GED);	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Resided in an out of home placement in Maryland at the time of his or her 18 <sup>th</sup> birthday; or	<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Resided in an out of home placement on his or her 13 <sup>th</sup> birthday, and was placed into guardianship or adopted out of an out of home placement after his or her 13 <sup>th</sup> birthday; or	<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Resided in an out-of-home placement in the State for at least 1 year on or after their 13 <sup>th</sup> birthday and returned to live with their parents after the out-of-home placement ended.	<input type="checkbox"/> Yes <input type="checkbox"/> No
E. Is the younger sibling of a child who meets the qualifications stated in either A, B or C above and was placed into guardianship or adopted concurrently out of an out of home placement by the same guardianship or adoptive family.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Case Worker Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_