



ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES

Provisional Foster Home Verification

I. A DCFS staff member discussed becoming a Provisional Foster Home with me. I know I may become a Provisional Foster Parent for [Child(ren) Name(s)]

to receive help to provide for the relative children I plan to have placed in my home. I understand that I must meet all of the licensing requirements and standards as a regular foster home after a period of six months as a Provisional Foster Home in order to become a regular foster home or otherwise lose my status as a Provisional Foster Parent.

I am aware that with Provisional Foster Care there is not a board payment for each child placed in my home until I become a regular foster home. However, with Provisional Foster Care, custody must remain with the DHS, and the child(ren), although placed in my home, are still in foster care.

During the time I am opened as a provisional foster parent, I understand that I will not receive any financial assistance, including board payments, from the Department, except for financial assistance for which I have applied and for which I qualify for pursuant to the program guidelines, such as the Transitional Employment Assistance Program, Food Stamps, Medicaid, and federal adoption subsidy.

I understand that if I choose not to become a Provisional Foster Parent and I receive custody of the children I am financially responsible for the children. I fully understand that once I receive custody of the child(ren) and choose not to be become a Provisional Foster Parent, the Department cannot go back and provide provisional foster care services, which means I will never be able to get a board payment for the children.

I also understand that by accepting custody of my relative child(ren), I agree to participate in the permanency activities developed in the child(ren)'s protective services case plan until the goal of the case plan is achieved.

Relative Name

Relative Name

Relative Signature

Date

Relative Signature

Date

II. I choose to become a Provisional Foster Parent.

Relative Name

Relative Signature

Date

Relative Name

Relative Signature

Date

