## SC Need-based Grant Waiver Form For Foster Care Youth

Name	
Student ID	
Email Address	
Name of College	
Please indicate the term(s) you are req	questing funds (ex. Fall 2020/Spring 2021)
the Department of Social Services may	ted by the SC Commission on Higher Education (CHE) and y be released to them. These State agencies may access my financial information in order to provide academic and
to participate in the SC Need-based Gr SCNBG may also be eligible for the F the institution and providing official v current custody of DSS (either in DSS	Application for Federal Student Aid (FAFSA) Form in order rant program (SCNBG). Students who are eligible for Foster Care Youth SCNBG and are responsible for contacting rerification to the institution and to CHE that he/she is in Scustody or Independent Living Program through DSS). In letter or other verifiable documentation from DSS. Entation once per institution.
Name of Case Worker	County & Contact Number
Signature of Case Worker	Case Worker E-mail address
Date	

In addition to the waiver form, the DSS case-worker <u>must also submit a letter of verification</u> that the above mentioned student <u>is currently</u> in custody of DSS and/or participating in the DSS Independent Living Program. Students who have been adopted or voluntarily left Foster Care/DSS are not eligible.

One copy of the SC Need-based Grant Waiver Form and verification letter must be submitted to each of the following agencies: 1) SC Commission on Higher Education, 1122 Lady Street, Suite 400, Attn: Need-based Grant Coordinator, Columbia, SC 29201 or email it to kharris@che.sc.gov; 2) SC DSS, Attn: Foster Care/Independent Living Program, P.O. Box 1520, Columbia, SC 29202; and 3) The financial aid representative at the institution.