

Kinship Care Form

Use this form to verify that the student is under the care of a "relative providing Kinship Care" and is not living in Arlington for educational purposes only. School officials should only collect this form if the person providing full-time care for the student is *NOT* the parent, legal guardian, or court appointed custodian of the student and whose parent, custodian, or guardian is unable to supply full-time care, nurturing and protection due to serious family hardship. Submit this form to the APS Welcome Center.

Step One: Determine if you are a "relative providing Kinship Care".

A "relative providing Kinship Care" is a person "connected by blood or affinity", other than a parent or court-appointed custodian or guardian, who provides full time care, nurturing and protection to a student who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care, nurturing and protection due to serious family hardship. The student may not be residing in Arlington for educational purposes only. A relative providing Kinship Care must establish Arlington residency as required on the Arlington Public Schools Student Registration Form, in addition to establishing his/her status as a "relative providing Kinship Care." See reverse for definitions of relative, full time care, nurturing, and protection.

Step Two: Provide information about your relative providing Kinship Care status.		
Student First Name:	Student Last Name:	
Your First Name:	Your Last Name:	
Your Address:		
City:	State:	ZIP:
Relationship to student:	Date student started residing with you:	
Verify relative providing Kinship Care status (check any that apply):		
☐ I provide full time care for the student	\square Student resides with me	
☐ I provide nurturing and protection for the student	☐ I am a relative of the student connec	ted by blood or affinity
Step Three: Provide information about the parent/legal guardian.		
Full Name of Parent/Legal Guardian:		
Address of Parent/Legal Guardian:		
City:	State:	ZIP:
The parent or legal guardian is unable to provide full time care, nurturing and protection because of the following serious family hardship (check any that apply, documentation is required):		
☐ he/she has an active military assignment	☐ he/she is incarcerated	
□ he/she suffers from a serious illness□ he/she is deceased	 □ he/she does not live with the child due to neglect and/or abuse □ he/she has abandoned the child 	
Step Four: Confirmation of relative providing Kinship Care	·	
By signing below, I swear and attest that I am the relative providing Kinship Care and the parent, custodian, or guardian is unable to supply such care, nurturing, and protection because of a serious family hardship and that the student is not residing with me for educational purposes only . I further accept that all provisions set forth on the APS Student Registration Form are incorporated and merged herein.		
Relative providing Kinship Care SIGN HERE:		Date:
I hereby certify that on this (day) of	(month) (year), th	e above subscribers personally
appeared before me and made oath in due form of the law that the fo	oregoing facts are true to the best of their I	knowledge, information, belief,
under penalty or perjury. My Commission Expires//	/ Notary Public	
SCHOOL OFFICIAL USE ONLY Complete the area below to confirm o	r deny school verification of relative member provi	ding kinship care status.
I reviewed the relative providing Kinship Care status as specified above and the re and that the parent or legal guardian □ is able to provide full time care, nurturing serious family hardship. The student □ is / □ is not residing in Arlington for educa Rationale for decision including presence or absence of documentation:	g and protection $/\Box$ is unable to provide full time	
I certify, under the penalties of perjury, that I have personally reviewed all the documents presented and affirm that the information represented above is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to APS administration, external auditors, and other agencies as permitted under the Code of Virginia, upon request.		
School Official Name (print):	Signature:	Date:

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Definitions of relative, full time care, nurturing, and protection.

A relative providing Kinship Care must submit documentation to verify the application. The following are examples of documents you be asked to provide.

Methods

Unexpired official documentation from the federal government or the State of Virginia with an issue date within the last 12 months immediately preceding the school's review of residency documentation, indicating that the caregiver receives public or medical benefits on behalf of the student, including, but not limited to, Supplemental Security Income annual benefits notification or TANF verification of income notice or recertification approval letter.

An attestation for a relative providing Kinship Care completed and signed by a legal, medical or social service professional attesting to the relative's status relevant to the student and issued within the last 12 months immediately preceding the school's review of residency documentation.

Government issued documents showing the parent/legal guardian is incarcerated or deceased

Military issued documents showing the parent/legal guardian has been assigned to a location where their child cannot reside with them.

Am I a relative providing Kinship Care?

The Code of Virginia § 63.2-100 defines Kinship Care as the full-time care, nurturing, and protection of children by relatives. Arlington Public Schools Policy J-5.3.30 Admissions defines relative as "a person connected with another by blood or affinity". The enrolling student must *reside* with the relative providing Kinship Care, and the relative providing Kinship Care *must provide the student with full-time care, nurturing, and protection*. In addition, the student's parents, guardians, or custodians are unable to provide full-time care, nurturing, and support due to serious family hardship. If you are not a relative connected with the student by blood or affinity, do not provide full-time care, nurturing, and support, and the student's parents, guardians, or custodians do not suffer from a serious family hardship, or the child is residing with you for educational purposes only, you do not qualify as a relative providing Kinship Care. The following table, while not a comprehensive list, can help you determine if you are a relative providing Kinship Care.

Relative	 Are you connected with the child by blood or affinity? Are you a sibling, aunt, uncle, grandparent, cousin, etc. of the child? Do you have a long-term established relationship with the child such as a godparent or close family friend? Are you co-habitating with the parent/legal guardian?
Educational Purposes Only	Is this child living with you for any of the following purposes? The parent/legal guardian wants the child to go to school in the US Arlington provides a better educational than where the child's parent/legal guardian resides
Full time care	Do you provide the following care on a daily basis? Bathing, Feeding, and Dressing Supervising the child's activities Assisting with other physical care needs A location for the child to sleep
Nurturing	Do you perform the following nurturing activities? Attending school conferences Disciplining the child Assuring medical attention will be received by the child Involvement in the child's extracurricular activities
Protection	Do you perform the following protection activities? Providing clothing Providing shelter

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