

Self-Sufficiency Plan

B. Complete ONLY if ETV eligible				
If youth/young adult plans to engage in an ETV plan while attending a post-secondary institution or training program, is form PPS 7001 ETV Program Plan attached? The PPS 7001 shall be reviewed, updated, and approved at every case plan or when circumstances change. ETV verification must be from the DCF IL Coordinator.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Self-Sufficiency Plan Participants				
By signing this plan, I am indicating that I agree to comply with this plan as written. I understand that failure to meet or progress towards the goals identified in this plan and maintain communication with my IL Coordinator may result in a delay and/or denial of payments and/or services. I also understand that continued non-compliance or lack of progress on my part toward my self-sufficiency goals may result in the closure of my Independent Living case.				
Youth/Young Adult Signature:		Date:		
Signatures	Date	Signatures	Date	
*IL Supervisor:		*DCF IL Coordinator:		
Mentor:		Other Participant:		
By signing above, I verify eligibility and approve services for this youth/young adult.		*By signing above, I verify eligibility and approve services for this youth/young adult.*		

