

Applicant User Guide

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Introduction

Congratulations on expanding your family through adoption and thank you for being an adoptive parent in the State of Ohio! This user guide will explain the steps to complete an application for the Ohio Adoption Grant Program.

Please refer to the following link before proceeding with your OAGP application. <u>Ohio Adoption Grant Program Pre-Go Live Guidance</u>

Only one application can be submitted for each child. Include all documents to be reviewed when you submit your application. Answer the questions completely and accurately.

What is OAGP?

OAGP stands for the **Ohio Adoption Grant Program**. This grant allows Ohio's eligible adoptive families to apply for a one-time payment per adopted child. On this portal, an applicant will complete an application and upload all required documentation for the program. The applications will be reviewed and approved for a one-time payment of an eligible grant amount based on the application and documentation provided.

What is needed to begin my application?

- You will need the ability to upload the required forms from your computer, tablet, or mobile device.
- Note: For best results, use a laptop or desktop computer.
- Two forms of identification for EACH adoptive parent.
 - Ohio Driver's License or State of Ohio Issued Photo ID
 - Social Security Card
- Post-Adoption Social Security Card for the adopted child.
- For private, independent and international adoptions, a child Social Security Card and the petition to adopt is required.

What is needed to complete and submit my application?

- A copy of your finalized adoption decree.
- Completed and signed <u>IRS form W9</u> (needed only for Parent 1, who will be the payee).
- Proof of foster placement prior to adoption, if applicable. This form is located here: <u>Ohio</u> <u>Adoption Grant Program Agency Letter</u>
- Completed Special Needs Documentation JFS 01058 signed by a qualified professional, if applicable.

*Note: Any outstanding child support will be deducted prior to your award payment being issued.

Need more Help?

- For additional help with your application, please click on the "**User Guide**" link at the top of any page.
- Live Chat may be available for users **Monday through Friday** from **8:00am- 4:30pm** to receive immediate assistance.



• Questions may also be directed to <u>OFCOhioAdoptionGrant@childrenandyouth.ohio.gov</u>. This mailbox is also monitored **Monday through Friday** from **8:00am- 4:30pm**.

Privacy Statement

By accessing and using this computer system, you are consenting to system monitoring for network administration and security purposes. Any information entered into this system will be uploaded and stored within the Ohio Adoption Grant Program (OAGP) system. All information will be available to personnel employed by the Ohio Department of Job and Family Services (ODJFS) and/or the Ohio Department of Children and Youth for the purposes of reviewing the grant funds applications. Anyone who attempts to gain unauthorized access to, or exceed authorized access to this system, could be subject to criminal and civil penalties and/or administrative action.

If you are aware of any such unauthorized activities, it is your responsibility to notify the system administrator immediately.

Creating an Account with MyOhio

- 1. Go to the webpage: <u>https://fosterandadopt.jfs.ohio.gov/adoption/grant</u>.
- 2. Click launch button.
- 3. On the MyOhio.gov login page, click the **Create Account** button.
- 4. The **Create OH**|**ID Account** page will appear. Enter in your e-mail address, re-enter the same e-mail address in the second box, then click the **Send PIN** button.
- 5. The **E-mail Verification** page will appear, stating an e-mail with a one time PIN has been sent to your accou



Find out more about OH|ID>



OH ID		Hello, Please enter the following one-time	€OH ID	
Create OH[ID Account	Email Verification	expire in 15 minutes. Verification PIN: 800010	Create OH ID Account	Email Verification
	Work one OH(ID account, you can sign in to multiple State of Ohio agency systems more securely.	If you did not initiate this request, or feel you have received this message in	Email Verification	Core Ph
Email Verification	Too need an active email address to create an OH(D account. Need to create one? Companies such as <u>Google</u> . <u>Microsoft</u> , <u>ACL</u> , and <u>Yahoo</u> offer free email accounts.	error, please disregard and delete it.	2 Personal Info	scolo vieneo
2) Personal Info	We need to wrife the email address you want to use for your OH(ID account. A one-time PNI will be emailed to the email address you provide below.	The OHID account team	3 Pick a Username	Having Transition?
Pick a Username	Email Address Confirm Email Address	Ohio basessets terms	(4) Create Password	Search your just mail and spare lotter for an annali town InDAOTREPO. Kompresedenting plotta, pro.
Create Password	enal@enal.com enal@enal.com		(5) Account Recovery	 March and a subject and the subject state
Account Recovery			6 Terms& Concitions	
) Terms & Conditions				

- 6. Enter the **PIN** received in the e-mail, then click the **Next** button.
- 7. Enter in your **Person Info**, including Legal First Name, Legal Last Name, Date of Birth, Last 4 digits of SSN (optional), then click the **Next** button.

reate OH ID Account	Personal Info		
	Legal First Name	Legal Last Name	
Email Verification	Ann	AdoptiveMom	
2 Personal Info	Date of Birth	Last 4 digits of SSN (optional)	
3) Pick a Username	01/01/1970 Be sure to use your real date of birth, you may need it for		
4 Create Password	account recovery later.		
5 Account Recovery			
6 Terms & Conditions			

8. **Pick a Username** by entering in a value that you will easily remember, then click the **Next** button.

∂OH ID		
Create OH ID Account	Pick a Username	
Email Verification	Username Requirements Must be between 6-64 characters	
Personal Info	Cannot start or end in a special character Cannot contain only numbers Only or @ No other special characters	
3 Pick a Username	Username	
(4) Create Password	annadoptivement	
5 Account Recovery		
6 Terms & Conditions		
	Cancel	Next



9. **Create A Password** that is easy for you to remember, but difficult for others to guess. Confirm the password by entering it a second time, then click the **Next** button.

10. *Optional*: Provide a Mobile Number for easier account recovery in the future, then click **Send PIN**. Otherwise, click <u>skip this step</u>.

11. Read through the **Terms & Conditions** and click the box next to **I Agree**. Confirm you are not a robot by answering the question asked at the bottom of the screen. A **VERIFIED** prompt will display if answered correctly. Then, click **Create Account**.

reate OH ID Account	Create Password	
Email Verification	Password Requirements Must have at least 8 and no more than 30 characters in length Must centrin Loberance form each of the following strength:	
Personal Info	Music contain 1 character from each of the following categories: o Upper case letters (A-Z) c Lower case letters (A-Z)	
Pick a Username	 Lover case recer (arz) Numbers (0-9) Smerial characters (15#, 96@~A&* -+ex=c081(96**-1/?)) 	
Create Password	Cannot include your first name, last name, username, or OHJ/D Example: If your name or username is John Smith, your password cannot contain " "Smith"	John" o
5 Account Recovery	Password Confirm Password	
Tarms & Conditions		

OH ID	
Create OH ID Account	Account Recovery
Email Verification	Your email () is the main way you'll reset your password. Adding your mobil number to your account ensures that we have a way to reach you if you lose access to your email.
Personal Info	Set up mobile/text message account recovery You will receive a PIN via text message. Message and data rates apply. <u>See Terms & Conditions and</u>
Pick a Username	Privacy Policies. Mobile Number
Create Password	555-555-5555 Send PIN
5 Account Recovery	If you choose not to add your mobile number to your account at this time, you can skip this step,
6 Terms & Conditions	
	Cancel Next

rearres On ILD ACCOURT rearres CONDUCTORS is order to proceed with this request, you must agree to the following terms and Email Verification Personal Info Personal Info Piguate with the Same of conducting on any agrees to an entering communication in interconce form passwords) and for rearranging access to your computer, any you agree to accept possenation you are the solar of conducting on any you agree to accept possenation you are reasonable for maintaining the conflictentially of you passwords) and for rearranging access to your computer, any you agree to accept but occurs under your Office Accession of the Department of	conditions. e you consent to use electronic
In order to proceed with this request, you must agree to the following series and Email Verification By citcling "Lagree" and creating as ONIO Citizen, Business, or Workforze profile iggatures with the State of Osa and review's communication in netroscic form processing in the state of osa and review's communication in netroscic form By citcling "Lagree" and creating as ONIO Citizen, Business, or Workforze profile program of the State of Osa and review's communication in netroscic form processing in and review and the state of the	conditions. e you consent to use electronic -
Email Verification by citcling "1 Agent and creating an OHO Citaen, busines, or Workforce politic isoparares with the State of Obio and receive communications in electronic form personal Info If you use this site, you are responsible for maintaining the confidentiality of you passenetized and for remarcing access to you computer, and you agent the state photometry of the Obio Exemption of the Obio Exemption of the other under you of Obio Execution of passenetized in the Obio Exemption of the Obio Exemption of the Obio Exemp	e you consent to use electronic
Personal Info If you use this size of Olive and renew communications in rectronic form If you use this key, you are responsible for maintaining the candidensible of you password() and for remaintaining access to you computer, and you age to accept Pick a Username that occur under your OH(0) account(s) or password(s). The Ohio Department of	-
Personal mo If you use this site, you are responsible for maintaining the confidentiality of you passened(s) and for restricting access to your computer, and you apreced to accept Pick a Username that occur under your OH(ID account(s) or password(s), The Ohio Department of	- Philip
Pick a Username that occur under your OH(ID account(s) or password(s). The Ohio Department of	ronjio accountis) and
	Administrative Services
reserves the right, in the event of a violation of law or State of Ohio policy, or as a	result of any suspicious
Create Password Ohio.gov. or cancel transactions related to your OHID account.	emove or edit content on
Children under the age of 13 are not eligible to use services that require the subm	nission of personal information
Account Recovery and should not submit any personal information to us. This includes submitting	personal information to the
website as part of a user profile or profile personalization. If you are a child under	r the age of 13, you can use
these services only if used together with your parents or guardians. Ask permission guardians if you are under the age of 13.	on from your parents or
E2 1Agree	
Confirmation and a reliat	
Confirm you are not a robot	
What is the 2nd digit in 217903?	



12. You'll receive a confirmation screen which indicates that your account is being created, and to check your email for details. Click on log in to OH|ID once you receive that e-mail. If you do not receive it in your inbox, please check your spam folder.

13. The e-mail received will confirm creation of your **OH**|**ID** account

- Create OH/ID Account
 Check your Email
 We are working to create your new OH/D account. This may take a few seconds or a few min
 OH/ID: annadoptivemom
 Personal Info
 Personal Info
 - Once you receive a confirmation email, return here to log in to OHID.
- Pick a Username
 Create Password
- Account Recovery

Confirmation

Your new OH|ID account has been created

Welcome to OH|ID. This email confirms you created an OH|ID account for:

Name: Ann AdoptiveMom OHIID: annadoptivemom Email: <u>@hotmail.com</u>

Return to your browser to continue to OH|ID login.

Please note, this email comes from a no-reply email address. Replies to this email are not monitored.

Dhio's Digital	Identity. One State. One Accou	int
Register once,	use across many State of Ohio websites	s
(Create Account	
og In		
og In OHJID annadoptivemo	m	
og In OHIID annadoptivemo	om	
og In OHJID annadoptivemo	om S	2

14. You may now enter your newly created **OH**|**ID** and **Password**. Click the **Log in** button.



Creating An Application

There are two tabs located on the main screen of the **Ohio Adoption Grant Program** portal. The first is the **Application Instructions**. Please read this page before applying so you are prepared for the materials you may need on hand, which are also listed at the beginning of this guide.

1. When ready, click on the tab for **Create/View Application**



- If applicable, a Special Need Documentation Form ODJFS 1058 completed and signed by a qualified professional.
- 2. The Welcome Screen appears, displaying any existing applications in the system for your account. Click on the **Start New Application** button.





Adoptive Parent(s) Information

Note: Parent 1 will be the individual completing the IRS Form W-9.

- 1. Enter the requested information. **Important:** All values marked with a red asterisk * are required.
 - First Name*

Last Name*

•

•

- Middle Name
- Date of Birth*

Social Security Number*

Ethnicity*

- Race*
- Email*
- Phone Number*

ADOPTIVE PARENT(S) INFORMATION					eps
Please provide the adoptive parents information. Adoptive parent 1 shall be the applicant that will be completing the United States internal revenue service (IRS) form W-9. "Request for Taxpaver Identification Number and Certification."			0	ADOPTIVE PARENT(S) INFORMATION	
Service (ins) form w-s, nequest for taxpayer fue	number and Cert	incation.		•	ADOPTIVE CHILD'S INFORMATION
Parent 1 Information				-	DOCUMENTATION TO BE ATTACHED/UPLOAD
Ann		A	doptiveMom		W-9 FORM
* Social Security Number		* Date of Birth (mm/dd/yyyy)			IDENTIFICATION FORMS
000-00-0000		01/01/1970	莆		
* Ethnicity					FOSTER CAREGIVER ADOPTION
Hispanic/Latino	•				SPECIAL NEEDS ADOPTION
Race American Indian Alaskan Native Asian Multi-racial (one or more races unknown) M * Email	Black/African American lulti-racial (all races unknown)	Native Hawaiian Other	Pacific Islander 🖌 White ish to provide		AFFIRMATION
email@email.com		(555) 555-5555			

2. Click the box next to **Add Second Parent**, if applicable. The page will display **Parent 2 Information (Optional)**. Fill in the requested data for **Parent 2**.



 Parent 2 Information (Optional) 			
* First Name	Middle Name	* Last Name	
Andrew		AdoptiveDad	
* Social Security Number		* Date of Birth (mm/dd/yyyy)	
111-11-1111		01/01/1968	
* Ethnicity			
Not Hispanic/Latino	•		
Kace American Indian Alaskan Nativ Multi-racial (one or more races unkr Email	e 🗌 Asian 🔽 Black/African Americ nown) 🗌 Multi-racial (all races unkn	can Native Hawaiian Other Pacific Islander W own) Unknown I do not wish to provide	hite

- 3. Enter Name of Adoptive Parent who will be payee for Ohio Adoption Grant payment.
- 4. Enter **Payee Address (Note:** The address should match the photo ID provided, otherwise, additional proof of residency will be required.)
- 5. Click the Next button OR click Go Back To Home Screen

* Name of Adoptive Parent who will be payee for Ohio Adoption Grant payment	
Ann Adoptive Parent	

For tax purposes, please provide the address of the applicant that is completing the United States internal revenue service (IRS) form W-9, "Request for Taxpayer Identification Number and Certification.".

Payee Address

* Address	
100 Main Street	
Address Line2	
Apartment 1	
* City	
Anywhere	
* State	
Ohio	
*Zip Code	
40000	

Go Back To Home Screen

6. The system will present an error message in red if there is any missing information on this page, or if the name of the payee does not match one of the Adoptive Parents.

* Name of Adoptive Parent who will be payee for Ohio Adoption Grant payment

Ann Adoptive Parent

Name is case sensitive; First Name and Last name must match what is typed in Person 1 or Person 2.



Next

Adoptive Child's Information

- 1. Enter the requested information for the **Adoptive Child**. **Important:** All values marked with a red asterisk * are required.
 - First Name*

• Date of Birth*

- Middle Name
- Last Name*

- Gender*
- Ethnicity*

- Type of Adoption*
- Date Adoption Finalized*

- Social Security Number*
- Race*
- 2. Click **Next** to proceed to the **Documentation to be Attached/Upload** section, click Previous to return to the **Adoptive Parent(s) Information**.

Adoptive Child's Information	Middle Name of Adoptive Ch	ild	* Last Name of Adoptive Child		0	ADOPTIVE PARENT(S) INFORMATION
Amir			AdoptiveChild			DOCUMENTATION TO BE ATTACHED/UPLOA
Social Security Number		* Date Of Birth				
222-22-2222		01/01/2015		苗		W-9 FORM
Sender * Ethnicity			IDENTIFICATION FORMS			
ale v Hispanic/Latino v		•				
Race American Indian Alaskan Native Asian Multi-racial (one or more races unknown) M Type of Adoption	 Black/African American ulti-racial (all races unknown 	Native Hawaiian	Other Pacific Islander 🕑 White do not wish to provide		0	FOSTER CAREGIVER ADOPTION SPECIAL NEEDS ADOPTION AFFIRMATION
Public				•		
Date Adoption Finalized						

Documentation to be Attached/Upload

- 1. In this section, you will need to upload a copy of your final adoption order, interlocutory order or adoption or recognition of adoption by this state under <u>section 3107.18</u> of the Revised Code.
- 2. Select the type of document you will be uploading in the **All Grant requests** drop-down box.
- 3. Click on the **Upload Files** button or drag the file into the section.



DOCUMENTATION TO BE ATTACHED/UPLOAD	Steps
Please upload the final adoption order, interlocutory order of adoption or recognition of the adoption by this state under section 3107.18 of the Revised Code.	ADOPTIVE PARENT(S) INFORMATION ADOPTIVE CHILD'S INFORMATION
* All Grant requests (select any one): Final adoption order	O DOCUMENTATION TO BE ATTACHED/UPLOAD
All Grant Request Documents	W-9 FORM IDENTIFICATION FORMS
Go Back To Home Screen Previous Next	FOSTER CAREGIVER ADOPTION SPECIAL NEEDS ADOPTION
	AFFIRMATION

4. Select the location of the file you wish to attach, then click **Open**.

C Open				\times
\leftarrow \rightarrow \checkmark \uparrow 📜 \Rightarrow This PC \Rightarrow Desktop \Rightarrow Important	Documents	ٽ ~		Documents
Organize Vew folder			8== ▼	. ?
J Training & Help ^ 🗌 Name	Status	Date modified	Туре	Size
Training BA Worl Pinal Order of Adopt	ion 🕄	3/20/2023 9:34 AM	1 Microsoft Word E) 1i
 Videos Whiteboards This PC 3D Objects Desktop Documents Downloads Music Pictures Videos SDisk (C:) 				
× <				>
File name: Final Order of Adoption		~	Open C	Cancel

5. A confirmation screen indicating the document has been successfully uploaded with a green check should appear. Click **Done**.

Up	load Files
Final Order of Adoption.docx 12 KB	O
1 of 1 file uploaded	Done

6. Click the **Next** button to proceed to the **W-9 Form** section or click **Previous** to return to the **Adoptive Child's Information** section.

DOCUMENTATION TO BE ATTACHED/UPLOAD	Steps
Please upload the final adoption order, interlocutory order of adoption or recognition of the adoption by this state under section 3107.18 of the Revised Code.	ADOPTIVE PARENT(S) INFORMATION ADOPTIVE CHILD'S INFORMATION
*All Grant requests [select any one]: Final adoption order	O DOCUMENTATION TO BE ATTACHED/UPLOAD
All Grant Request Documents	
1 Upload Files Or drop files	W-9 FORM
Final Order of Adoption.docx	IDENTIFICATION FORMS
	FOSTER CAREGIVER ADOPTION
Go Back To Home Screen Previous Next	SPECIAL NEEDS ADOPTION
	AFFIRMATION

Note: If you wish to delete the uploaded document, click the trash can icon next to the record. The following confirmation message will appear. Click **Delete** to finish removing the document or **Cancel** to retain the document.

Delete Document	
Deleting a document will remove the document from the current application.	
Are you sure you would like to delete the document?	
Cancel	Delete

W-9 Form (completed for Payee Only)

- 1. Complete a United State Internal Revenue Service (IRS) form <u>W-9 Request for Taxpayer</u> <u>Identification Number and Certification</u> and save it/scan it to your computer.
- 2. Choose **Yes** from the drop-down box indicating **A completed W-9 form**.
- 3. Click **Upload Files** or drop the saved file into the box.
- 4. Click **Next** to proceed to the **Identification Forms** section or **Previous** to return to the **Documentation** section.



W-9 FORM	This is a Required Document for the Grant Appliaction
Please upload a completed United States Internal Revenue Service (IRS) form W-9, "Request for Taxpayer Identification Number and Certification.".	Steps
Link is on this website. A completed W-9 form	ADOPTIVE PARENT(S) INFORMATION
Yes 💌	ADOPTIVE CHILD'S INFORMATION
Completed wis rom ↑ Upload Files Or drop files	OCUMENTATION TO BE ATTACHED/UPLOAD
We Farm Jaco	O W-9 FORM
	IDENTIFICATION FORMS
	FOSTER CAREGIVER ADOPTION
Go Back to Home Screen Previous Next	SPECIAL NEEDS ADOPTION
	AFFIRMATION

Identification Forms

- You will need to provide two forms of current identification for the payee identified as Adoptive Parent 1 who is submitting the W-9 form. This can include a driver's license or State ID and a Social Security Card. Driver's License or State ID is used to verify you as an Ohio resident. The address(es) should match what has been entered as Payee's Address.
- 2. Click **Upload Files** or drop the saved file into the box.
- 3. Click **Next** to proceed to the **Foster Caregiver Adoption** section or **Previous** to return to the **W-9 Form** section.

IDENTIFICATION FORMS	S	teps
Upload two forms of ID: Current identification for Ohio residence of the payee (can be driver's license or State ID) and a United States Social Security card of the payee.	0	ADOPTIVE PARENT(S) INFORMATION ADOPTIVE CHILD'S INFORMATION
tentification roms ↑ Upload Files Or drop files	e	DOCUMENTATION TO BE ATTACHED/UPLOAD
Copy of License.docx	÷	W-9 FORM
SS Card.docx	÷	IDENTIFICATION FORMS
	•	FOSTER CAREGIVER ADOPTION
Co Rock To Homo Seroon		SPECIAL NEEDS ADOPTION
		AFFIRMATION

Foster Caregiver Adoption

- If your adopted child was fostered by you prior to adoption finalization, upload documentation of their foster placement in this section. This can be your **Ohio Adoption Grant Agency Letter** or other documents you can obtain from the Public Children Services Agency who assisted with the adoption finalization.
- 2. Answer Yes or No if this was an Adoption by Foster Caregiver.
- 3. If **No** is answered, you may proceed to the **Next** section
- 4. If **Yes** is answered, click the **Upload Files** button or drop the saved file(s) into the box.



5. Click **Next** to proceed to the **Special Needs Adoption** section or **Previous** to return to the **Identification Forms** section.

FOSTER CAREGIVER ADOPTION	Steps
Please upload documentation of fostering this youth prior to adopting. Please seek assistance from the Public Children Services Agency (PCSA) or Private Child Placing Agency (PCPA) that held custody of the child prior to adoption. (if not applicable, click next to continue)	ADOPTIVE PARENT(S) INFORMATION
Adoption by Foster Caregiver (if you are requesting a \$15,000 grant payment) Yes	DOCUMENTATION TO BE ATTACHED/UPLOAD
Attach documentation with paperwork indicating adoptive parent cared for the adopted child prior to the adoption	• W-9 FORM
① Upload Files Dr drop files	IDENTIFICATION FORMS FOSTER CAREGIVER ADOPTION
ICCA Foster.doex	SPECIAL NEEDS ADOPTION
Go Back To Home Screen Previous Next	AFFIRMATION

Special Needs Adoption

- 1. If applicable, complete a **JFS Form 01058 Ohio Adoption Grant Program Special Needs Documentation** and save it to your computer.
- 2. Answer **Yes** or **No** if this was a **Special Needs Adoption**.
- 3. If No is answered, you may proceed to the Next section
- 4. If **Yes** is answered, click the **Upload Files** button or drop the saved file(s) into the box.
- 5. Click **Next** to proceed to the **Affirmation** section or **Previous** to return to the **Foster Caregiver Adoption** section.

SPECIAL NEEDS ADOPTION	Steps
Please upload the "JFS form 01058 Ohio Adoption Grant Program Special Needs Documentation." Form linked on this website. (if not applicable, click next to continue)	ADOPTIVE PARENT(S) INFORMATION
	ADOPTIVE CHILD'S INFORMATION
Special Needs Adoption Yes	OCUMENTATION TO BE ATTACHED/UPLOAD
Attach JFS 0XXXX qualified professional who does not provide casework services to the adopted child diagnosed the child with one or more special needs in the professional's area of expertise prior to the final order of adoption, interlocutory order of adoption, or recognition of the adoption by this state under	W-9 FORM
section 3107.18 of the Revised Code.	IDENTIFICATION FORMS
The For Special Mader unoption ① ① Upload Files Or drop files	FOSTER CAREGIVER ADOPTION
JFS 01058.docx	SPECIAL NEEDS ADOPTION
	AFFIRMATION
Go Back To Home Screen Previous Next	

Affirmation

- 1. Read the Affirmation statement and click the radio button next to the sentence I/we also acknowledge that by clicking "Submit", I/we are electronically signing this application and will be held to all of the above acknowledgements.
- 2. Click the **Submit for Approval** button (or click **Previou**s to review prior sections).



AFFIRMATION			St	teps
I/We affirm under penalty of periury that the information given in this application is accurately accurately applied to the information of th	ate		0	ADOPTIVE PARENT(S) INFORMATION
 I/We understand that verification of a finalized adoption on or after January 1, 2023, and provide the standard st	oof of residency in Ohio	will be required.		
 I/We understand that I/we must apply within one calendar year of my/our adoption finalization 	ation.		0	ADOPTIVE CHILD'S INFORMATION
 I/We understand and agree that other persons or organizations may be contacted to obtain 	the necessary proof of	ligibility. I/We understand that in		
some instances. I/we may be asked to give consent to make whatever contacts necessary t	o determine eligibility.		0	DOCUMENTATION TO BE ATTACHED/UPLOAD
I/We acknowledge that approval is contingent upon the availability of state funds for this p	rogram. I/We understand	that to be eligible for Ohio Adoption	Ĩ	
Grant funds, I/we am required to submit a copy a completed W-9 form, two forms of identif	ication, and proof of a fir	alized adoption. If applicable, I/we		W/A FORM
may need to submit proof that I/we was a foster caregiver(s) to this child prior to adoption.	If the child has a diagno	sed special need, I/we will be required	Y	W-9 FORM
to submit a completed OAGP Special Needs Form (JFS 01058).				
I/We affirm that I/we have not previously received a grant payment from the Ohio Adoption	Grant Program for the	hild I/we are submitting this	0	IDENTIFICATION FORMS
application.	5	5		
. I/We understand that all/portion of any grant awarded can be intercepted if I/we owe past	child/spousal support.		0	FOSTER CAREGIVER ADOPTION
· I/We understand that my application will be reviewed and once my eligibility has been determined and once my	armined, I/we will be con	tacted with a decision.		
			0	SPECIAL NEEDS ADOPTION
I/we also acknowledge that by clicking "Submit", I/we are electronically signing the second secon	nis application and will b	e held to all of the above		
acknowledgements.	_		ó	AFFIRMATION
Go Back To Home Screen	Previous	Submit For Approval		

3. A confirmation screen will appear if the application was successful. Otherwise, the system will prompt you to missing items from the application. Click **Return to Home Page** to continue.

Note: Once you have submitted an application, it can no longer be edited unless returned to you for corrections.

Confirmation

Thank You! Your application has been submitted!



4. An email notification should also be received confirming your submission.



Editing/Revising an Application

address for OAGP here.

 If you have started an application and are returning to it later, navigate to the Create/View Application tab and click on the Edit button to the right of the record, and pick up where you left off for completion. The Status will display as In Progress.



pplication Instructions	Create/View Appl	lication			
Welcome Ann Adoptive	/lom!				
Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009		In Progress		Mar 17, 2023	💉 Edit
		O St	art New Application		

2. Once you have submitted an application, you may view it by going to the **Create/View Application** tab and clicking on the **View** button to the right of the record. The **Status** will display as **Submitted for Approval**.

pplication Instructions Create/View Application					
Welcome Ann Adoptiv	eMom !				
Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009	Amir AdoptiveChild	Submitted For Approval	Mar 20, 2023	Mar 17, 2023	
Start New Application					

3. If there is information missing from your application, you should receive an email notification indicating what still needs to be added to your application to process it.



The application **Status** will display as **Rejected**. The **Edit** button will be available to correct the missing items.



4. To apply for a grant for another adopted child, click **Start New Application**.



Application Instructions Create/View Application

elcome Ann AdoptiveMom !					
Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAD-00009	Amir AdoptiveChild	Submitted For Approval	Mar 20, 2023	Mar 17, 2023	
		🕄 Start New Applie	cation		

Application Process Next Steps:

Once you submit your application, a State of Ohio employee will review your information. The reviewer can approve your application or reject your application.

A rejected application means that the reviewer could not approve it based on how it was submitted. If they reject it, they will add some comments and an e-mail will automatically be sent to you, detailing the reasons for the rejection and how you may correct it.

If the reviewer approves your application, it will be submitted to a supervisor for the next level of approval.

The supervisor can approve it, reject it, or deny it. If the supervisor rejects it, you will receive an e-mail with comments as to the reason.

If it is denied, the supervisor has determined that you do not meet the requirements for an adoption grant award. An e-mail will be sent with the reason as well.

If your application is Denied, it will reflect this in the Status column:

Application Number	Child Name	Status	Status Last Updated On	Created Date	View/Edit
OAG-00017	Jerry Smith	Denied	Mar 28, 2023	Mar 24, 2023	o View

You will have 30 days to re-submit your application to be reviewed again by another supervisor. To do this, next to your denied application, click the **View** button. There will be a button for you to use to re-submit for a second review. You will need to acknowledge the affirmations again before it can re-submitted. The decision on the second review is final.

Grant Application		
Application Status	Second review is currently allowed.	
> Adoptive Parent Information		
> Adoptive Child's Information		
> Uploaded Files and Document Information		
> Affirmation		
Return to Home Screen		Resubmit for Second Review

After your Second Review is submitted, you will receive an email to confirm your second request. The status of the application will also show **2nd Review Submitted**.





Award amount and payment

Once your application is approved, you will be notified of the approved amount. Prior to the payment being issued, the payee will be screened for any outstanding child support owed. If child support is owed, that amount will be deducted from your award amount. You will be notified of your final awarded amount via email, prior to payment being sent.

Please note that due to the expected influx of applications and the verifications that must be completed to ensure adoption grants are awarded properly, this process will take time and may take a few months for payments to be sent.

Help

If you need additional information or assistance, please contact <u>OFC-OhioAdoptionGrant@childrenandyouth.ohio.gov</u>

Live Chat

It is expected that a **Live Chat** feature will be available on the Home page. However, the agent will only be able to help with how the application site works.

Live Chat agents will not be able to help with the content of your application (such as what you need to attach for each section) or provide any information about if you qualify for a grant or when payment can be expected. These questions would need to be directed to <u>OFC-</u><u>OhioAdoptionGrant@childrenandyouth.ohio.gov</u>





Department of Job and Family Services Health & Human Services Office of Families and Children

Mike DeWine, Governor Matt Demechaniler, Director Jon Husted, Lt. Governor

Ohio Adoption Grant Program:

A request has been received by ______ who is applying for The Ohio Adoption Grant program to confirm the adoptive parent served as a foster parent caring for ______ prior to the adoption.

Our agency verifies the following:

First and Last Name of Adoptive Child:	
First and Last Name of Adoptive Parent(s):	
Placement Begin Date:	
Placement End Date:	

Please contact me at _____ with any questions.

Sincerely,

30 East Broad Street Columbus, OH 43215 Jfs.ohio.gov

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This institution is an equal opportunity provider and employer.

