Payment Request Form
Chafee Educational and Training Voucher (ETV) Program

Student Information

Name (Print): ___________________________ Student ID: ___________________________

Semester: ___________________________ GPA: ___________________________

Foster Care State: ___________________________

The Chafee Educational and Training Voucher (ETV) Program awards up to $5,000 annually during the academic year to qualified students who have been in the foster care system so they can pursue an academic college education or technical and skill training in college to be prepared to enter the workforce. The actual award amount is determined by the student’s financial need, which is calculated in accordance with the Higher Education Act of 1965, as amended.

Eligibility Requirements

You must:
1. Be ages 15 to 21, unless you were participating in the Chafee ETV Program at age 21 in which case you can receive ETVs until you are 23; and
2. Be in the foster care system, or aged out of the foster care system, or have been under the care of a legal guardian; or
3. Have been in the foster care system or under the care of a legal guardian and adopted after age 16; and
4. Be enrolled in an eligible postsecondary institution; and
5. Submit a Free Application for Federal Student Aid (FAFSA) for each year you are in college.

Renewal Requirements

You must:
1. Not have attained the age of 21, or the age of 23 if you were receiving a Chafee ETV at the age of 21 and received the Chafee ETV continuously; and
2. Continue to make satisfactory academic progress in your program of study; and
3. Submit a FAFSA for each year you are in college.

LSU will bill the Louisiana Office of Student Financial Assistance (LOSFA) for these funds after the first day of class. The funds will appear as a credit on your Billing Statement once the funds are received by the university.

By signing, I certify that the information I have provided is true and complete to the best of my knowledge. I realize that giving misleading information or forged documentation will result in my being reported to the Student Advocacy & Accountability Office for appropriate disciplinary action.

Student’s Signature: ___________________________ Date: ___________________________