

Emancipation Folder (White)	
Left Side	Right Side
<p>DCFS 414, Assessment/Referral of Youth for Independent Living Program</p> <p>DCFS 5557, TILP Transmittal & Supplement</p> <p>DCFS 5201, Two Way Action Lettergram (To ILP Coordinator From CSW, To CSW From ILP Coordinator)</p> <p>DCFS 5202, Two Way Action Lettergram (To Contract Agency From CSW/ILP Coordinator)</p> <p>DCFS 5203, 50 Suggestions for Preparing for Independent Living</p> <p>DCFS 5646, Emancipating Youth Mental Health Records Request Letter</p> <p>DCFS 5647, Emancipating Youth Access to Juvenile Records Letter</p>	<p>ABCDM 228, Applicant's Authorization for Release of Information</p> <p>Advance Health Care Directive form</p> <p>DCFS 5204A, Exit Outcomes for Youth Aging Out of Foster Care</p> <p>DFA 285, Application for Food Stamps Benefits</p> <p>FC 1633A, SSI Screening Guide</p> <p>FC 1637, 90-Day Transition Plan</p> <p>SOC 405, Individual Client Characteristic Data Transitional Independent Living Plan (TILP)</p>