

STIPEND RECIPIENT AGREEMENT

_____ (“Stipend Recipient”) has been selected as a recipient of the Virginia Title IV-E Child Welfare Stipend in the total amount of _____ (to be utilized for tuition, fees and books). This stipend has been awarded for _____ academic year(s) beginning on _____ and ending on _____ at _____ University’s accredited School of Social work. The funds for this stipend derive from the federal title IV-E Child Welfare Training Program, combined with a match from the Virginia Department of Social Services. This stipend is given in the form of a “forgivable loan”, whose repayment will be waived if the Stipend Recipient fulfills the terms of this agreement.

Responsibility of the Title IV-E Child Welfare Stipend Program (CWSP) Recipient

Please initial each item:

Academic

_____ Stipend Recipient will successfully complete the coursework necessary to receive either a Bachelor of Social Work or Master of Social Work degree at one of the participating universities. The coursework includes a Child Welfare Policy and Child Welfare Practice course. These must be CWSP approved electives.

_____ Stipend Recipient will maintain a 3.0 grade point average in their School of Social Work MSW program, and a 2.75 grade point average in their BSW program. BSW Stipend Recipients must not receive a C in more than 2 classes during their BSW Social Work program. MSW Stipend Recipients must receive a B or better in all coursework.

_____ MSW Stipend Recipient must complete one field practicum in a child serving setting, and one field practicum at a Local Department of Social Services (primarily in a foster care/prevention/adoption role).

_____ BSW Stipend Recipient and MSW Advanced Standing Stipend Recipient must complete one field practicum at a Local Department of Social Services (primarily in a foster care/prevention/adoption role).

_____ Stipend Recipient must participate in additional CWSP seminars/training as indicated by their University Coordinator.

_____ Stipend Recipient must complete the VDSS Foster Care New Worker Policy Training (CWSE 3000) prior to graduation.

_____ A Stipend Recipient must satisfactorily complete their education (including field work) during the normative period of full-time study.

_____ A Stipend Recipient who cannot complete graduation requirements because of personal hardship or disability may request a postponement for up to one year. These requests must be approved by the University Coordinator and the State Child Welfare Stipend Coordinator. Hardship postponements may be extended for one additional year. At the end of the postponement period, the Stipend Recipient must return and complete their education or must repay the amount of Stipend that had been awarded thus far. Waivers of repayment may be made in the case of permanent disability or death.

Financial

___ Stipends will be utilized first for tuition and any remaining stipend funds may be utilized for university fees and/or books.

___ Stipend Recipient will investigate and understand the impact of the stipend dollars on the Stipend Recipient's financial aid package.

___ Stipend Recipient will notify the University Coordinator when considering adding/dropping any courses as it may have an impact on their financial assistance.

Employment

___ Stipend Recipient must accept an offer of employment at a local Department of Social Services (LDSS) agency in Virginia within 6 months of graduation. Stipend Recipient understands that the LDSS agency may not be in the area of his or her residence, and the stipend recipient may be required to move to another part of the state in order to fulfill his or her post-graduation employment requirements.

___ Stipend Recipient must provide proof of employment (i.e. LDSS offer letter) to the University Coordinator.

___ Stipend Recipient must maintain all written documentation (email, letters etc.) of his or her employment seeking activities.

___ Stipend Recipient must render a minimum of one (1) calendar year of continuous and satisfactory full time employment with a LDSS agency within Virginia, for every academic year that he or she received the stipend. This full time position must be primarily in a foster care, adoption and/or prevention role.

___ Stipend Recipient must notify the University Coordinator of any changes in legal name, address, email or place of employment until the employment pay-back obligation is complete.

___ Stipend Recipient must participate in follow-up evaluations of the Child Welfare Stipend Program as requested.

___ Stipend Recipient must not terminate employment before the required work pay-back period is completed (either voluntarily or due to termination by the employer).

___ Stipend Recipient may be granted a hardship postponement of up to one year, in three month increments, with permission of the VDSS State Child Welfare Stipend Program Coordinator and their LDSS Director. Hardship postponements may be extended for up to one additional year. At the end of the postponement period, the Stipend Recipient must return and complete either work requirement or repay the amount of the award. Waivers of repayment may be made in the case of permanent disability or death.

___ If the Stipend Recipient is laid off because of county budget cuts and cannot secure employment at another LDSS agency in Virginia, the payback may be waived at the discretion of the VDSS State Child Welfare Stipend Program Coordinator.

Additional Requirements

____ Stipend Recipient must disclose any history of arrest and/or conviction. Further, the stipend recipient must disclose any incident of arrest and/or conviction from the date of this agreement until completion of the Stipend obligation, within 7 days of the incident. Failure to adhere to these requirements will result in the Stipend Recipient becoming ineligible for, and/or terminated from the CWSP and responsible for repaying any funds expended thus far in accordance with the CWSP.

____ Stipend Recipient must disclose any previous history with a Local Department of Social Services within the state of Virginia.

____ Stipend Recipient must successfully complete the Child Protective Services background screening process. If the Stipend Recipient has a history that is deemed to be disqualifying for employment by the Virginia Department of Social Services, the Stipend Recipient will be ineligible for and/or terminated from the Program and be responsible for repaying any funds expended in accordance with the program.

____ Stipend Recipient must verify identity and employment eligibility by completing Section 1 of INS Form I-9, providing the required documentation and submitting it to the CWSP University Coordinator as part of the application process. The Stipend Recipient is required to maintain their eligibility for employment in the United States throughout the period of participation in Title IV-E Child Welfare Stipend Program, including the required employment period.

Payback Requirements

____ Stipend Recipients are responsible for payback of the total amount of the stipend award and cost of collection under the following circumstances:

- Failure to successfully graduate and complete the academic requirements of the CWSP within the normative period, unless granted a hardship postponement.
- Failure to meet security clearance screens for work with children. These include, but are not limited to, criminal background checks, CPS Child Abuse Registry screens and any other background checks required by the LDSS agency to which the Stipend Recipient applies for employment.
- Failure to meet the legal requirements for employment eligibility within the USA as defined by 8 U.S.C. § 1324a.
- Failure to gain employment within 6 months of graduation at a LDSS agency within the state of Virginia. Forgiveness of the repayment requirement is at the sole discretion of the State of Virginia.

____ Stipend Recipients who have paid back a part of their work requirement will pay a pro-rated amount under the following circumstances:

- Voluntary termination of employment before completion of the work requirement (unless granted a hardship postponement extension).
- Termination of employment by their LDSS employer (for poor performance or improper conduct) before completion of the work requirement.

Additional Provisions

____ Stipend Recipient understands and is in agreement with the provision that information regarding his or her academic performance while in the Child Welfare Stipend Program will be shared with the VDSS State Coordinator.

____ This agreement is in full effect upon disbursement of any portion of the Title IV-E Child Welfare Stipend monies and shall terminate upon successful completion of the required employment or reimbursement by the Stipend Recipient.

Responsibility of Participating Universities and Virginia Department of Social Services (VDSS)

- To provide Stipend Recipient with funds as agreed upon in this Agreement for the selected academic year(s) contingent upon availability of title IV-E Child Welfare Stipend Program funds.
- To suspend or terminate stipend payments if Stipend Recipient is not performing meeting academic expectations as outlined in this Agreement.
- To halt and/or seek repayment of stipend payments in the event the Stipend Recipient does not meet the employment obligations of this Agreement, including forwarding the account to collections and placing a hold on student records until the stipend award is repaid in full.
- To retain the right to pro-rate, reduce or otherwise alter the amount of repayment based on the individual circumstance of a Stipend Recipient who does not fulfill their contractual obligation. These decisions will be made on a case by case basis by VDSS CWSP State Coordinator, independent of any other decision and at their sole discretion.

All parties acknowledge careful review of this Agreement and fully understand the obligations hereunder, and are voluntarily entering into this Agreement. In witness thereof, this Agreement is signed and entered into on the date listed below.

_____ (Stipend Recipient) Print Name	_____ Signature	_____ Date
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_____ (University Coordinator) Print Name	_____ Signature	_____ Date
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_____ (CWSP VDSS State Coordinator) Print Name	_____ Signature	_____ Date
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