

## Amendment Request to Extend Care to Residents 18 Years of Age and over, but under 21 years of Age

**Use of form:** This form is mandatory. This form meets the requirements of DCF 52.62(4)(d) (Residential Care Center for Children and Youth), and DCF 57.515 (Group Homes) of the Wisconsin Administrative Code. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wis. Stats].

**Instructions:** The licensee shall complete this form and submit requested documents if they will be serving youth ages 18 to 21 for a Residential Care Center. For Group Homes that will be serving 3 or more youth ages 18 to 21, this form must be completed unless an exception has been granted. The licensee shall sign, date and submit the form to their Licensing Specialist. The Licensing Specialist shall review the request. If approved, the Licensing Specialist will send a new license with the updated target population to the provider along with this signed document. If denied, the Licensing Specialist will send this document back to the licensee.

Name – Facility	Facility ID
Address	
Type of Facility: <input type="checkbox"/> Group Home <input type="checkbox"/> Residential Care Center for Children and Youth	
Proposed Start Date:	

**Submit the following documents electronically with this form to your Licensing Specialist:**

1. Program statement and operating plan per DCF 57.05(1) (a)-(f) or DCF 52.41(1)
2. Description of how the facility will maintain resident age span per DCF 52.41 (2)(c)1. or DCF 57.19(5)(a)
3. Policies and procedures should be updated to include Transitioning to Independence-Core Components with all of the following in detail:
  - **Development of basic self-sufficiency skills;**
  - **Housing stability;**
  - **Supports and Resources to Promote Financial Stability; and**
  - **Cultivating a sense of self-worth and right to healthy relationships**
4. An updated Policy and Procedure Checklist (Form DCF-F-2378-E (group homes) or DCF-F-CFS 2168-E (Residential Care Centers for Children and youth) which includes any policies and procedures that have changed.
5. This form as well as the above documents must be emailed electronically to your Licensing Specialist.

\_\_\_\_\_  
**SIGNATURE** – Licensee or Authorized Representative

\_\_\_\_\_  
Date Signed

**For Department Use Only:**

Approve:

Deny:

Reason for Denial:

\_\_\_\_\_  
**SIGNATURE** – Licensing Specialist

\_\_\_\_\_  
Date Signed