

Date

Legal Guardian Name

Street Address

City, State, Zip Code

Re: Annual **KinGAP/GAP** Eligibility Review

Dear (Guardian's name) :

Per NC State policy, our agency is required to assure that all children receiving Guardianship Assistance (**KinGAP/GAP**) continue to meet the criteria for that benefit. We are sending this letter as part of the process for meeting that requirement.

It is your responsibility as the legal guardian to notify us of any changes affecting your legal and financial responsibility for the youth and other changes affecting the receipt of benefits, as follows:

1. The legal guardian(s) will immediately notify the agency, in writing, of any address change so that receipt of benefits will not be delayed;
2. The legal guardian(s) will immediately notify the agency, in writing, if they are no longer legally responsible for the care and custody of the youth or are no longer providing financial support for the youth. This includes, but is not limited to, removal from the home and placement into out of home care due to a substantiated report of child abuse or neglect, youth's marriage, death, or entry into military service.

If you have experienced any such changes as described above, please contact me at the number below as soon as possible. As long as you are the child's legal guardian and remain financially and legally responsible, even if the child is out of the home, guardianship assistance can continue. All benefits that they are currently receiving will be continued without interruption, unless we hear from you that changes have occurred in your circumstances that affect their eligibility.

Thank you for your assistance with this required review. We hope this letter finds you and your family doing well.

Sincerely,

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Social Worker III

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Social Work Supervisor III