

Cover Page



Youth Empowerment Integration  
Program

Please print neatly.

Youth Name \_\_\_\_\_ Today's Date: \_\_\_\_\_

Current Address \_\_\_\_\_

Current Phone #: \_\_\_\_\_

Case Worker \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

- |   |                  |
|---|------------------|
| <input type="checkbox"/> Cover Sheet                  | Required         |
| <input type="checkbox"/> Care Plan                    | Required         |
| <input type="checkbox"/> Letter of Interest           | Required         |
| <input type="checkbox"/> Questionnaire                | Required         |
| <input type="checkbox"/> Placement Papers             | Required         |
| <input type="checkbox"/> Immunization records         | Required         |
| <input type="checkbox"/> Driver's license or state ID | If available     |
| <input type="checkbox"/> Birth Certificate            | If available     |
| <input type="checkbox"/> Social Security Card         | If available     |
| <input type="checkbox"/> Medical identification card  | If available     |
| <input type="checkbox"/> Detainment Papers            | UAM if available |
| <input type="checkbox"/> Work Visa                    | UAM if available |
| <input type="checkbox"/> Educational Documents        | If available     |
| <input type="checkbox"/> Psychiatric Documents        | If available     |
| <input type="checkbox"/> Fingerprint card             | If available     |
| <input type="checkbox"/> Other                        |                  |
| <input type="checkbox"/> Other                        |                  |
| <input type="checkbox"/> Other                        |                  |
| <input type="checkbox"/> Other                        |                  |

Request Interview on (date & time)

- 1.
- 2.
- 3.

Notes:



## Application Packet

The application packet consists of the application with information as required by state licensing; application questionnaire (below); copies of birth certificate, social security card, Medicaid cards, medical history including allergies, immunization records, school records, court papers, and guardianship papers; and other items as indicated and/or requested as indicated previously. Early in the program, we expect to be moving quickly to fill empty beds. These questions will allow us to ascertain the appropriate placement/housing unit to assign the participant to based on their development.

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## Application Questionnaire

*On a separate sheet of paper*, answer the following questions. There are no wrong answers, but please answer thoroughly to the best of your ability.

1. What is the difference between turning 18 and being mature?
  2. What are your strengths?
  3. What behaviors do you need to work on?
  4. What types of challenges have you had at previous placements?
  5. What is self-exploration and why is it important?
  6. What is staff's role in your placement?
  7. Why is it important to follow staff direction and/or instructions?
  8. Why is it important to give back to the community?
  9. What is a mentor and what is their role?
  10. Why is setting boundaries important? Give an example of a boundary that you disagreed with and what you thought would be a more appropriate boundary (i.e. borrowing without asking).
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