Dear Youth or Parent/Guardian:

Growing up in this day and age, especially in the past year of COVID, has presented many challenges to attending and succeeding in school. Some of these challenges have caused many youth to become disengaged in learning, and progress toward successful completion of school has gotten off-track. Without a diploma or GED, it can be hard to get a good paying job, join the military, or get vocational training to become contributing members of the community.

Mentoring and activities through the Youth Reengagement Program is one way to give extra support to youth who might be struggling with grades, school attendance, physical or emotional health, and other challenges and barriers. Participating in this program can help youth set goals, and provide connections to other community agencies for getting back on-track to earning a diploma or GED. This program is provided to our community through grant funds awarded by the Oregon Department of Education's Youth Development Division. More information on this organization can be found at: www.oregonyouthdevelopmentcouncil.org

The counselor at school has seen some struggles happening, either with grades, attendance, or something else that they feel can be helped by being a part of the Youth Reengagement Program. A referral will be sent to the Program Coach, a trained professional who works with youth to set goals, arrange tutoring, connect with other community agencies to provide support (such as transportation, food, health care, etc.), and aid youth with job searches, finding internships/job shadowing opportunities, locating vocational training, or enrolling in college.

An information sheet about the program and who to contact is being provided. Also, there are likely questions about the program that you may have, and a "Frequently Asked Questions" (FAQs) page is provided to hopefully answer some of those. The Youth Reengagement Program is here to help youth with getting back on-track, and moving forward in these difficult times.

Take a look at the FAQs and information hand-out, and note any other questions you may have. The Program Coach will be in touch soon. Information on our organization can be found at: www.citizensforsafeschools.org

We look forward to talking with you about the Youth Reengagement Program, soon!

Thank you!

Youth Reengagement Program Info Sheet

The **Citizens for Safe Schools Youth Reengagement Program** is funded through the Student Success Act Fund, and supported by the Oregon Youth Development Division of Oregon Department of Education.

Goals of the program include:

- Reengaging youth who leave high school before earning a diploma or completing a GED, or are behind in credits.
- Delivery of specialized education, training, and/or support services that lead to high school graduation and GED completion.
- Providing trauma-informed, cross-sector programming that meets youth where they are at.
- Linking educational reengagement with supportive services, workforce development and college.
- Building community collaboration and connections to create opportunities and positive outcomes for youth.

Program process:

- Referral packets are provided to schools/community agencies
- Youth/parent is counseled by school/community agency of disengagement
- *Release of Information* <AND> *Referral Form* is completed by school/agency & sent to Youth Reengagement Program
- Program Coach contacts youth/parent (if under 18)

For more information: Citizens for Safe Schools
731 Main St., Suite 207
Phone: 541-882-3198
Email: info@citizensforsafeschools.org
Mailing Address: PO Box 243 - Klamath Falls, OR 97601

This program is made possible through the Youth Development Division of Oregon Department of Education (ODE). According to ODE, *"The Student Success Act has provided funds for a Youth Reengagement Program to serve youths who have dropped out, or are recommended to participate in the Reengagement Program by DHS, the juvenile court system, or the Oregon Youth Authority - and are 14-21 years of age at the beginning of the school year."*

What does a Reengagement Program Do?

The Reengagement Program will work with eligible youth to provide:

- *Academic instruction allowing youth to receive credit towards graduation or obtain a GED.*
- *Mentoring including career counseling and workforce readiness.*
- *Assisting with wrap-around services to support at-risk youth.*

For more information, please visit their website at: **www.oregonyouthdevelpmentcouncil.org**

Youth Reengagement Program FAQs

Frequently Asked Questions...

How are youth referred to the program?:

Youth who have been identified as needing extra support and guidance for reengagement, and meet the program's criteria, can be referred by schools/school districts, Tribes, OYA, JDH, or juvenile court. Youth (and parent/guardian if under 18) will be contacted by an individual of those referring agencies, offered service - and, if interested - referred to the Youth Reengagement Program. When referral is received, youth (and parent/guardian if appropriate) will be interviewed by the Program Coach. Youth must be 14 to 21 and in dropout status <OR> be 16 to 21 and lacking 3 or more credits after being enrolled for 1+ years.

Will Parents/Guardians be contacted?:

We recognize that parent/guardian involvement is vital to a youth's academic, social, and career success. Phone calls, letters, and other strategies by the youth's school will be utilized to inform parents of their youth's disengagement. When a youth is referred, the school or community agency <AND> the Reengagement Program Coach will contact parent/guardian (if under 18) to proactively offer program support services in order to reengage the youth back to school, offer tutoring services to bring grades up, and/or connect youth with other services that include vocational training, social/ mental health services, and other services such as transportation and peer support.

What is a Reengagement Needs Assessment, and how are they used?:

To assist partnering community agencies and the Youth Reengagement Program in identifying challenges and circumstances that can add to youth disengagement, a *Reengagement Needs Assessment* will be administered to both youth and parent (if youth is under 18) as part of the intake process. This assessment identifies possible causes for youth disengagement, helps to determine what community services can help eliminate barriers and challenges, and serves as a tool to measure program and youth outcomes. The *Reengagement Needs Assessments* will also help in designing an *Youth Reengagement Action Plan* for youth.

What kinds of activities are done to reengage youth?:

As a regular part of mentoring, youth will work with the Program Coach to do *SMART Goal Setting* to determine youth goals, steps to achieve them, and milestones reached in the process. Milestones reached will be recognized with incentives, in which hard work will be rewarded. Other activities to reengage youth include tutoring, outreach by the program on behalf of youth to set up workforce training, college, job, supporting services, and other opportunities that will benefit youths and their families - all with the ultimate goal of reengagement to promote success and completion of GED, Diploma, or workforce goals.

Youth Reengagement Program
Authorization for Release of Information

Youth Name: _____ **Birthdate : _____**

I authorize and consent to the mutual exchange of information between the Youth Reengagement Program Staff of Citizens for Safe Schools and the agencies or individuals indicated below for the purpose of supporting the health, safety, and wellbeing of my youth participating in the Youth Reengagement Program. Information may be shared by and with (not an exhaustive list):

- School(s)
- Klamath Basin Behavioral Health (KBBH)
- Oregon Department of Human Services (DHS)
- Lutheran Community Services Northwest (LCSNW)
- Klamath County Juvenile Department
- Klamath Tribes
- Klamath Community College/Oregon Tech (KCC/OIT)
- Klamath Works
- Klamath Promise
- Southern Oregon Education Service District (SOESD)
- Other agencies involved in youth's support:_____

Information to be disclosed may include:

- School grades and attendance records
- Family history
- Medical record(s)
- Psychological evaluation(s)
- Court record(s)
- Other protected information:_____

- To exclude:_____

This consent is valid for the child's entire duration in the Youth Reengagement Program and can be used as a release of information at all of the schools they may be enrolled in during their time in the program. However, this consent is subject to revocation at anytime, except to the consent that the program which is to make the disclosure has already take action in reliance on it. If you prefer that any of the above information not be released, please indicate by writing it in the "To exclude" section.

I recognize the information named above may contain specifics that are protected by federal and state law, and I specifically consent to disclosure of such information.

Youth Signature (if over 18):_____ Date:_____

Parent/Guardian Signature (if under 18): _____ Date:_____

School Official Verifies Verbal Consent by Parent/Guardian if no Signature is Obtained:
Initials: _____ Date: _____

Youth Reengagement Program
Referral Form

Youth Information:

Name: _____ Gender: _____**M** _____**F** DOB: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian Name: _____ Relationship: _____

Address (if different from youth): _____

Parent Home #: _____ Cell#: _____ Work#: _____

Youth Home#: _____ Cell#: _____ Work#: _____

Youth's School: _____ Youth's Grade: _____

Youth's Ethnicity (check all that apply): _____ African American _____White _____ Hispanic/Latino

_____ Mexican _____ Asian _____ Chinese _____ Japanese _____ Indian (from India) _____ Korean

_____ Vietnamese _____ Native American/Alaska Native (Identified Tribe: _____)

_____ Native Hawaiian/Pacific Islander _____ Other (specify) _____

_____ Race/Ethnicity Unreported

Language Spoken by Youth: _____ English Only _____ Bi-Lingual _____Other (specify): _____

Language Spoken by Parent/Guardian: _____English Only _____Bi-Lingual _____ Other(specify): _____

Referring School/Agency Information:

Name of Referring Person: _____ Referral Date: _____

School/Agency: _____ Contact Phone: _____

Contact Email: _____

Youth Reengagement Program, Referral Form page 2

<u>Family Information:</u>

Youth lives with: ____Married Parents ____Unmarried Parents ____Single Parent ____Foster Family

____ Divorced Parents/Shared Physical Custody ____Step-Parent/Blended Family

Family member: _____ Other: _____

*Custody: If parents are divorced, who has 100% legal custody?: ____ Mom ____ Dad ____ Joint(50%)

Is youth part of a Military Family?: ____ YES ____ NO   Branch of Service: _____

Has a Child Protective Services referral ever been made?: ____ YES ____ NO ____ UNKNOWN

<u>Referral Information:</u>

Describe the reason(s) for referring youth to the Youth Reengagement Program (ex; recent changes in grades and/or attendance, recent changes with youth's family or living situation, specific challenges or difficulties - and if so, when did they begin? Give background information):

Is the youth on a waiting list or enrolled in other mentoring programs/support groups? ____ YES ____ NO
     If "YES", please describe:

Are there any specific cultural issues for youth/family that would be helpful to know? Please describe:

Youth Reengagement Program, Referral Form page 3

<u>Referral Information (cont'd):</u>

School Information: What do teachers say about the youth? How are grades? Are there behavior concerns? Any previous suspensions, expulsions, or disciplinary actions? If yes, describe.

Peer Relationships: How does youth relate to peers? Any significant relationships? Any difficulties getting along well with peers? Any specific age groups youth relates best with? Please give details.

Is there any other information about the youth that would be helpful for us to know? (ex; does the youth have an IEP or 504 plan? Have underlying medical condition(s)? Take medication(s) regularly?) Please give details - If none, type "none":

Signature of Referring Person: _____

Date: _____