

# YRG | Youth Participant Enrollment Form

## Youth Enrollment Information

### Enrollment History:

- 1<sup>st</sup> time enrolled in program
- 2<sup>nd</sup> time re-entry indicate QPR previously reported as exited (1<sup>st</sup> exit: Year \_\_\_\_ Quarter \_\_\_\_)
- 3<sup>rd</sup> time re-entry or more indicate quarters previously reported as exited - use "enrollment/exit notes" if you need more space  
1<sup>st</sup> time exited (Year \_\_\_\_ Quarter \_\_\_\_) 2<sup>nd</sup> time exited (Year \_\_\_\_ Quarter \_\_\_\_)

Last Name: \_\_\_\_\_

Enrollment Date: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth\*: \_\_\_\_\_

Address\*: \_\_\_\_\_

Phone Number\*: \_\_\_\_\_

\*Not required for YRG Quarterly Progress Reports, for organizational purposes only

## Youth Referral Information

### Referral Source

Who referred this youth to your services?

- Probation
- Court
- Community Organization
- School/Truancy
- Police/Law Enforcement
- Restorative Justice
- Service Referral
- Self/Family Referral
- Outreach
- Other (describe):

### Point of Diversion

At what point was youth diverted from the criminal justice system?

- No contact with law enforcement
- Informal contact with law enforcement
- Pre-adjudication
- Post-adjudication
- Unknown

### Participation Status

Has the youth's enrollment in this program been mandated or is it voluntary?

- Mandated
- Voluntary
- Other (describe):

## Youth Demographics at Enrollment

### Age Group

- 12 years or younger
- 13-17 years
- 18-24 years
- 25 years or older
- Unknown/Did not collect

### Gender

- Female
- Male
- Non-binary/3rd Gender
- Prefer to self-define
- Prefer not to state
- Unknown/Did not collect

### Race/Ethnicity

Please ask youth to self-report whenever possible. The State of California mandates that collection of race and ethnicity data must include and report each major Asian group and each major Pacific Islander group, and must provide the option of selecting more than one ethnicity or racial designation. If a youth selects more than one box here, please report them as "Multi-ethnic origin, ethnicity or race" on the QPR form.

### Education Status

- Enrolled in school
  - Middle school/Junior high
  - High school
  - Other school/training
- Not enrolled in school
  - Has HS diploma/GED
  - Did not graduate
- Other (describe):
- Unknown/Did not collect

### Employment Status

- Student – not looking for employment
- Employed – not looking for employment
- Employed – looking for additional/other employment
- Not employed – looking for employment
- Other (not employed, not in school but not looking)
- Unknown/Did not collect

- American Indian/Alaska Native

Asian:  
specify ⇨⇨⇨⇨

- Black or African American
- Hispanic, Latino, or Spanish
- Middle Eastern/North African

Native Hawaiian/Pacific Islander: specify  
⇨⇨⇨⇨

- White
- Other identified ethnic origin, ethnicity, or race
- Decline to state
- Unknown/Did not collect

⇨ Specify Asian Group

- Chinese
- Japanese
- Filipino
- Korean
- Vietnamese
- Asian Indian
- Laotian
- Cambodian
- Unknown
- Other

⇨ Specify Native Hawaiian/ Pacific Islander Group

- Native Hawaiian
- Guamanian
- Samoan
- Unknown
- Other

### Risk Status

- High-risk
- Medium-risk
- Low-risk
- Not assessed
- Other (describe):

### Housing Status

- Living with parents
- Living independently
- Living with relatives (not in foster care)
- Living in out-of-home care (through Child Welfare or Probation)
- Living in a car, on the street, an abandoned building, or tent
- Doubled up/couch surfing
- Other (describe):
- Unknown/Did not collect

## Youth Participation in Services

Please indicate which services youth received in each quarter.\*

GRANT YEAR QUARTER	YEAR 1				YEAR 2				YEAR 3			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
a. Assessment of risk/needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Referral/linkages to mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Referral/linkages to drug and alcohol services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Referral/linkages to any other services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Restorative justice activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Group/individual counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pro-social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Educational support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Mentoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Vocational training/placement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Other (describe):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Other (describe):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*On QPR, report youth each quarter in table C1 (page 9) but only count youth once per row when completing C2 "Annual Participation" yearly in Q4

## Youth Exit Information

### Exit Date

\_\_\_\_/\_\_\_\_/\_\_\_\_

(if not known, estimate)

### Reason for Exit

- Successful Completion
- Dropped out/Lost contact
- Non-compliant (asked to leave)
- Arrest/incarceration
- Services not appropriate for youth
- Other (describe):
- Did not collect

### Enrollment/Exit Notes:

## Youth Outcomes

Please indicate which outcomes were tracked/measured for this youth and if they had a positive outcome at the time of their exit.

YOUTH OUTCOME	Outcome Measured/ Tracked	Result	
a. Reduced assessed risk status.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
b. Improved mental health status.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
c. Improved substance abuse status.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
d. Positive youth development outcomes.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
e. Positive restorative justice outcomes.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
f. Improved educational outcomes.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
g. Improved vocational outcomes.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
h. Improved housing status.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
i. No contact with the criminal justice system.	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
j. Other:	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured
k. Other:	<input type="checkbox"/>	<input type="checkbox"/> Positive Change	<input type="checkbox"/> No improvement measured