



Homeless Teen Program

To whom it may concern:

The Children's Attention Home is committed to providing a safe and nurturing home to children in need in our community. As of January 2017, this includes youth from the community who have been identified as homeless or are at imminent risk of becoming homeless.

This program is open to youth ages 16 to 19, who are currently residing in Chester, Lancaster, York, Mecklenburg or surrounding counties. The Children's Attention Home can provide shelter services for up to five homeless teens at a time. Due to our licensing as a Level 1 shelter, these children cannot have a criminal record or previous involvement with the Department of Juvenile Justice.

Youth in the Homeless Teen program have the opportunity to stay at the Children's Attention Home for up to a maximum of two years, as long as they remain in compliance with the program guidelines. During this time, these residents will work to achieve their personal goals, identify community resources and establish connections, and begin their path to independence.

Through this program, the Children's Attention Home will provide safe, stable housing and developmental and supportive services. All children residing at the Children's Attention Home will receive necessary medical, dental, and vision care and mental health services. They will also receive social and independent living skill assessments and will develop goals based on their individual needs. Education levels will be assessed and academic support will be provided as needed. All residents of the Children's Attention Home will attend regular skill and support groups.

To be considered for this program, youth must meet all eligibility requirements and participate in an interview with our assessment and intake team.

Required Paperwork:

- Referral Form (if self-referral, youth will be asked to provide at least one additional reference)
- Phone Interview with youth and intake team
- Memorandum of Understanding signed by the youth
- If under 18, Parental Consent form signed by parent or legal guardian (hard copy required)

Residents are expected to follow all program rules and guidelines. Youth who are disruptive or are deemed a safety risk to themselves or others may be asked to leave the program.

Please return completed forms to:

**Children's Attention Home
Memo: Homeless Teen Application
PO Box 2912, Rock Hill, SC 29732
info@attentionhome.org**



Form #	FOR-UNY-001 -008
Revision #	000
Date	9-13-16

Eligibility requirements for unaccompanied youth:

All youth must:

1. Be between the ages of 16-19.
2. Reside in Chester, Lancaster, York, or Mecklenburg county.
3. Be in need of stable housing and support services.
4. Complete referral (self or outside agency) and application.
5. Complete interview and assessment process with Admissions Team.
6. If a minor, consent forms from legal guardians must be obtained.
7. Memorandum of Understanding must be agreed upon and signed.
8. Create goals and short and long term action plans with CAH Team.
9. Develop a timeline to identify and access additional resource providers.
10. Attend required appointments and meetings with service providers.
11. Attend required social work and independent living groups on campus.
12. Youth must be willing to adhere to all program and campus rules, as well as all established emergency procedures.



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Self- Referral Application

Name _____ Date of Birth _____

Phone _____ Email _____

Of months/ years homeless _____

How did you hear about this program? _____

How did you become homeless? _____

Describe your current situation _____

Describe your family history _____

List services you are currently receiving or support systems you are connected with:



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Outside Referral Form

(Service agency, resource provider, individual)

Date of referral _____ Referral source _____

Youth information

Full Name _____
(Last) (First) (Middle)

Address _____
Street Apartment/ Unit #

_____ City State Zip

Phone _____ Alternative contact number _____

Contact Information

Full Name _____
(Last) (First) (Middle)

Address _____
Street Apartment/ Unit #

_____ City State Zip

Phone _____ Alternative contact number _____

Reason for referral



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Memorandum of Understanding:

All youth who are eligible for residence at the Children's Attention Home must read and sign this Memorandum prior to admission. All youth should receive a copy of the resident's Bill of Rights at the time of their admission.

As a resident of the Children's Attention Home's Unaccompanied Youth Program, I agree to the following:

- _____ To provide at least one month's notice of my intention to move out.
- _____ To attend all required meetings, groups, and appointments on campus.
- _____ To attend all scheduled meetings and appointments with service providers.
- _____ To attend and participate in school, alternative education, and/or vocational program.
- _____ To follow all rules and cottage expectations explained to me at admission.
- _____ To complete required chores and responsibilities on campus.
- _____ To comply with all required room and property searches.
- _____ To be respectful of other residents and staff members at the Children's Attention Home.
- _____ To adhere to all safety and security restrictions.
- _____ To be actively involved in my care and long term planning.

Please initial by each statement after you have read and understand it.

The Children's Attention Home reserves the right to remove a resident from the Home without notice in the event of inappropriate behavior(s) or activities.

Resident _____

Date _____

CAH Staff Member _____

Date _____



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Legal Guardian/Parent Consent

I, _____, am the legal guardian for _____.
(Parent/ Guardian full name) (Child's Name)

I have read and understand the expectations of the Children's Attention Home Unaccompanied Teen Program.

I give permission:

- For my child (named above) to reside at the Children's Attention Home in accordance with program guidelines;
- For my child (named above) to participate in youth enrichment activities such as cultural events, community service, sporting events, and recreational activities.
- For my child (named above) to be transported to and from youth enrichment activities which may occasionally take place outside of York or Mecklenburg County;
- For my child (named above) to participate in individual and group conferences, skill building sessions and psycho-educational activities (life-skills, health education etc).
- For the Children's Attention Home staff and teammates to conduct room and property searches when necessary to insure the safety of staff and clients.
- For my child to use the phone and/ or the internet, as applicable, to contact myself, friends, community advocates, or other professionals working with my child.

In addition to agreeing to the above statements, I agree to hold in confidence any and all information I may receive regarding the Children's Attention Home. Information includes but is not limited to identifying any child or family that may receive services from the Children's Attention Home, any information my child may share with me about any the Children's Attention Home clients, or details of conversation I may have overheard regarding a client of the Children's Attention Home.

Legal Guardian/Parent Signature

Date

Children's Attention Home Teammate

Date