

**FULL SERVICE PARTNERSHIP**

**Transition Age Youth Key Event Tracking Form**

**FOR AGES 16-25 YEARS**

**PARTNERSHIP INFORMATION**

County Number	CSI County Client Number	Unique County ID (optional)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Youth's First Name	Youth's Last Name	
<input type="text"/>	<input type="text"/>	
Date Completed (mmddyyyy)	Youth's Date of Birth (mmddyyyy)	
<input type="text"/>	<input type="text"/>	

**CHANGE IN ADMINISTRATIVE INFORMATION**

*(skip this section if there are no changes)*

Is the youth CURRENTLY involved in:

AB2034	YES <input type="radio"/>	NO <input type="radio"/>	Date of AB2034 change (mmddyyyy): <input type="text"/>
Governor's Homeless Initiative (GHI)	YES <input type="radio"/>	NO <input type="radio"/>	Date of Governor's Homeless Initiative (GHI) change (mmddyyyy): <input type="text"/>
Transition Age Youth Program	YES <input type="radio"/>	NO <input type="radio"/>	Date of Transition Age Youth Program change (mmddyyyy): <input type="text"/>
Date of Provider Site ID Change (mmddyyyy): <input type="text"/>	NEW Provider Site ID <input type="text"/>		
Date of Full Service Partnership Program ID Change (mmddyyyy): <input type="text"/>	NEW Full Service Partnership Program ID <input type="text"/>		
Date of Partnership Service Coordinator ID Change (mmddyyyy): <input type="text"/>	NEW Partnership Service Coordinator ID <input type="text"/>		
Date of Partnership Status Change (mmddyyyy): <input type="text"/>	<b>Indicate new partnership status:</b> <input type="radio"/> Discontinuation/Interruption of Full Service Partnership and/or community services / program (indicate reason below) <input type="radio"/> Reestablishment of Full Service Partnership and/or community services / program		

**If there is a DISCONTINUATION/INTERRUPTION of Full Service Partnership and/or community services / program, indicate the reason (mark one):**

- ☐ Target population criteria are not met.
- ☐ Youth decided to discontinue Full Service Partnership participation after partnership established.
- ☐ Youth moved to another county/service area.
- ☐ After repeated attempts to contact youth, s/he cannot be located.
- ☐ Community services/program interrupted -Youth's circumstances reflect a need for residential/institutional mental health services at this time (such as IMD, MHRC, State Hospital).
- ☐ Community services/program interrupted - Youth will be serving jail/prison sentence.
- ☐ Youth has successfully met his/her goals such that discontinuation of Full Service Partnership is appropriate.
- ☐ Youth is deceased.

# **RESIDENTIAL INFORMATION - *includes hospitalization and incarceration*** **(skip this section if there are no changes)**

**Date of Residential Status Change (mmddyyyy):**   -   -

**Indicate the new residential status (mark one):**

## **GENERAL LIVING ARRANGEMENT**

- ☐ With one or both biological/adoptive parents
- ☐ With adult family member(s) other than parents - non-foster care
- ☐ In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate - must hold lease or share in rent / mortgage
- ☐ Single Room Occupancy (must hold lease)
- ☐ Foster Home (with relative)
- ☐ Foster Home (with non-relative)

## **SHELTER / HOMELESS**

- ☐ Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent)
- ☐ Homeless (includes people living in their cars)

## **SUPERVISED PLACEMENT**

- ☐ Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants, etc.)
- ☐ Unlicensed but supervised congregate placement (includes group living homes, sober living homes)
- ☐ Licensed Community Care Facility (Board and Care)

## **HOSPITAL**

- ☐ Acute Medical Hospital
- ☐ Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)
- ☐ State Psychiatric Hospital

## **RESIDENTIAL PROGRAM**

- ☐ Group Home (Level 0-11)
- ☐ Group Home (Level 12-14)
- ☐ Community Treatment Facility
- ☐ Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)
- ☐ Skilled Nursing Facility (physical)
- ☐ Skilled Nursing Facility (psychiatric)
- ☐ Long-Term Institutional Care (IMD, MHRC)

## **JUSTICE PLACEMENT**

- ☐ Juvenile Hall / Camp / Ranch
- ☐ California Youth Authority
- ☐ Jail
- ☐ Prison
- ☐ Other
- ☐ Unknown

**EDUCATION***(skip this section if there are no changes)***GRADE LEVEL INFORMATION**

Date of Grade Level Completion (mmddyyyy)

		-			-				
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Level of education completed:

- |                                    |                                      |  |  |
|------------------------------------|--------------------------------------|--|--|
| <input type="radio"/> Day Care     | <input type="radio"/> 6th Grade      | <input type="radio"/> High School Diploma / GED      | <input type="radio"/> Less than 2 years graduate school    |
| <input type="radio"/> Pre-School   | <input type="radio"/> 7th Grade      | <input type="radio"/> Less than 2 years college /    | <input type="radio"/> Master's degree (e.g., M.A., M.S.W.) |
| <input type="radio"/> Kindergarten | <input type="radio"/> 8th Grade      | Some Technical / Vocational Training                 | <input type="radio"/> 3-4 years graduate training          |
| <input type="radio"/> 1st Grade    | <input type="radio"/> 9th Grade      | <input type="radio"/> AA degree                      | <input type="radio"/> Doctoral degree (e.g., M.D., Ph.D.)  |
| <input type="radio"/> 2nd Grade    | <input type="radio"/> 10th Grade     | <input type="radio"/> Technical/Vocational Degree    | <input type="radio"/> Level Unknown                        |
| <input type="radio"/> 3rd Grade    | <input type="radio"/> 11th Grade     | <input type="radio"/> 3-4 years college              | (e.g., youth in non-public school)                         |
| <input type="radio"/> 4th Grade    | <input type="radio"/> 12th Grade     | <input type="radio"/> Bachelor's Degree (B.A., B.S.) |  |
| <input type="radio"/> 5th Grade    | <input type="radio"/> GED Coursework |  |  |

**SUSPENSION INFORMATION**

Date of Suspension (mmddyyyy)

		-			-				
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**EXPULSION INFORMATION**

Date of Expulsion (mmddyyyy)

		-			-				
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**FOR YOUTH WHO ARE NOT REQUIRED BY LAW TO ATTEND SCHOOL:****EDUCATIONAL SETTING INFORMATION**

Date of Educational Setting Change (mmddyyyy)

		-			-				
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**Indicate the new educational setting(s) (mark all that apply):**

- ☐ Not in school of any kind  
☐ High School / Adult Education  
☐ Technical / Vocational School  
☐ Community College / 4 year College  
☐ Graduate School  
☐ Other

If stopping school, did the youth complete a class and/or program? ☐ Yes ☐ NoDoes one of the youth's current recovery goals include any kind of education at this time? ☐ Yes ☐ No

# EMPLOYMENT

(skip this section if there are no changes)

Date of Employment Change (mmddyyyy):

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## CURRENT EMPLOYMENT

Indicate the youth's employment status... 	AVERAGE HOURS/WEEK	HOURLY WAGE
<b>Competitive Employment:</b> Paid employment <u>in the community in a position that is also open to individuals without a disability.</u>	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	\$ <div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <span>.</span> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
<b>Supported Employment:</b> Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided.	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	\$ <div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <span>.</span> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
<b>Transitional Employment/Enclave:</b> Paid jobs <u>in the community that are 1) open only to individuals with a disability AND 2)</u> are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	\$ <div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <span>.</span> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
<b>Paid In-House Work (Sheltered Workshop/Work Experience/Agency-Owned Business):</b> Paid jobs <u>open only to program participants with a disability.</u> A <i>Sheltered Workshop</i> usually offers sub-minimum wage work in a simulated environment. A <i>Work Experience (Adjustment) Program</i> within an agency provides exposure to the standard expectations and advantages of employment. An <i>Agency-Owned Business</i> serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	\$ <div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <span>.</span> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
<b>Non-paid (Volunteer) Work Experience:</b> Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
<b>Other Gainful/Employment Activity:</b> Any informal employment activity that increases the youth's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and/or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution).	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	\$ <div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <span>.</span> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>

Check here if the youth is not employed at this time: ☐Does one of the youth's current recovery goals include any kind of employment at this time? ☐ Yes ☐ No

## LEGAL ISSUES / DESIGNATIONS

*(skip this section if there are no changes)*

### ARREST INFORMATION

Date Youth Arrested (mmddyyyy):   -   -

### PROBATION / PAROLE INFORMATION

Date of Probation Status Change (mmddyyyy):

-   -

Indicate new probation status:

☐ Removed From Probation    ☐ Placed on Probation

Date of Parole Status Change (mmddyyyy):

-   -

Indicate new parole status:

☐ Removed From Parole    ☐ Placed on Parole

### CONSERVATORSHIP / PAYEE INFORMATION

Date of Conservatorship

Status Change (mmddyyyy):

-   -

Indicate new conservatorship status:

☐ Removed from conservatorship    ☐ Placed on conservatorship

Date of Payee Status Change (mmddyyyy):

-   -

Indicate new payee status:

☐ Removed from payee status    ☐ Placed on payee status

### DEPENDENT (W & I CODE 300 STATUS) INFORMATION

Date of W & I Code 300

Status Change (mmddyyyy):

-   -

Indicate new W&I Code 300 status:

☐ Removed From    ☐ Placed on  
W & I Code 300 Status    W & I Code 300 Status

## EMERGENCY INTERVENTION

*(skip this section if there are no changes)*

Date of Emergency Intervention (mmddyyyy):

-   -

Indicate the type of emergency intervention:

(e.g., emergency room visit, crisis stabilization unit)

☐ Physical Health Related    ☐ Mental Health / Substance Abuse Related

## COUNTY USE QUESTIONS

Date of County Use Field #1 Change (mmddyyyy):

-   -

Indicate NEW County Use Field #1

Date of County Use Field #2 Change (mmddyyyy):

-   -

Indicate NEW County Use Field #2

Date of County Use Field #3 Change (mmddyyyy):

-   -

Indicate NEW County Use Field #3