*Welcome!*

Thank you for your interest in the GLBT and ConneQT Host Home Programs of Avenues for Homeless Youth!

Both the GLBT and ConneQT Host Homes are community and volunteer-based responses to youth homelessness. Hosts in these programs are adults who open their homes to young people who need and are looking for resources and support. The GLBT Host Home Program provides transitional, longer-term housing for youth who identify as LGBTQ while the ConneQT Host Home Program provides more emergency-based and shorter-term housing for LGBTQ youth.

The GLBT and ConneQT Host Home Programs will succeed only because of the involvement and support from the community. These programs and the people behind them have a deep commitment to our communities, our youth and social change – not just through the sharing of resources, but through a transformative and intimate process of sharing our homes and our lives. We are thrilled to invite you into this partnership.

We know from research that youth experiencing homelessness are best supported when they are able to remain in the communities where they are comfortable, have friends, attend school, and go to work. For this reason, the goal of our host home programs is to recruit, screen, and provide support to volunteers who are willing to open their homes to young people ages 16 through 24 in their own communities who are experiencing homelessness or have unstable housing (16 and 17 year olds will be able to participate with authorization of their parents or guardians).

Being a host is a powerful and unique experience, and far from being easy. The commitment you are willing to make in order to be a host volunteer is an intense one, as is that of a youth who is moving into a host home. In turn, it will hopefully prove to be a gratifying and empowering experience for all involved.

The GLBT and ConneQT Host Home Programs are committed to keeping you informed, being clear about expectations, being up front and honest about decisions made regarding your application, listening to your concerns and feedback, respecting your input, finding the best match for you and the youth, and providing on – going support and training.

Please read carefully the information included in this packet. There is an application form, eligibility requirements, and questions to ponder before getting started. Once we receive the returned packet from you, we will read your application, start the background checks, and set up time for an initial interview. Two representatives of the programs will screen applicants and do the initial interview.

Again, thank you so much for wanting to be a part of host home. It is only through the generosity, spirit of solidarity and commitment of people like you that we are able to offer safer and affirming homes to youth.

Sincerely,

Ashley Morgan, GLBT Host Home Ryan Berg, ConneQT Host Home

**APPLICATION & TRAINING OVERVIEW**

1. Potential host home applicants attend informational meeting
2. Applicants fill out required forms and mail them to the program manager at Avenues for Homeless Youth, 1708 Oak Park Avenue, Minneapolis, MN 55411
3. Avenues performs background checks and sends reference requests
4. Applicants attend 16 hours of training
5. Applicants have home interview with staff and youth
6. Applicants are chosen as host volunteers
7. Host volunteers are matched with youth
	* *Youth review host files, including the host letter to youth participants.*
	* *Meeting of youth with potential hosts (with case manager and program manager)*
	* *Release of Liability waivers signed*
	* *Review goals, expectations, etc.*
	* *Youth moves in*
	* *The matching process for ConneQT is truncated and youth may move in the same night as meeting*
8. Host home manager provides support to hosts
9. Hosts attend on – going support training
	* *Monthly support group (hosts and HHP manager, 1 – 2 hours)*
	* *Trainings as part of the support group 3-4 times a year*
10. Youth attend social activities and meet with case manager
	* *Planned for youth, extended family, and friends*

**ELIGIBILITY AND EXPECTATIONS FOR VOLUNTEER HOSTS**

**All applicants must:**

1. Have an extra bedroom (providing privacy) for the youth
2. Be at least 25 years old
3. Have lived in the Twin Cities for at least a year
4. Live in the greater Metro area
5. Complete the application form, providing any relevant information
6. Have renter/homeowner's insurance, providing a file copy if requested
7. Provide three references
8. Authorize and pass background checks which include:
	* Public Records (i.e. arrest reports)
	* IntelliCorp Records, Inc.
9. Complete the initial training session (16 hours)
10. Complete a question and answer meeting with the program manager and an advisor.

The above criteria need to be successfully completed in order for an applicant to be qualified as a host. Applicants need to demonstrate a strong commitment to work with a youth to build a healthy and trusting relationship, an ability to provide a safe, decent, sanitary, stable and supportive environment and consistently demonstrate skills necessary to meet program objectives.

All applicants must be willing to adhere to all program rules and emergency procedures. They must report any changes in family composition and changes in legal status of any household members to the program manager. If selected, applicants and others in the household must be willing to ask for assistance for difficult situations. Applicants and members of the household must have not sexual contact or any other sexual activity with or around the youth placed in their home.

Participation of applicants may be terminated at any point in the process if the program manager and/or advisor feels the applicant is unable/not ready to be host volunteers.

**Host Home Support:**

After approval and once hosting, volunteers are provided regular support groups. These meetings will provide the hosts with an opportunity to share their experiences and learn from each other, as well as to learn from outside trainers up to four times a year. Youth involved in the program will receive ongoing support from their case managers. The main support person for the volunteer hosts is the program manager, whereas the main support person for the youth is the youth advocate/case manager. The case manager will work closely with the program manager to ensure that the host home receives the appropriate level of support throughout participation. Participation includes scheduled and unscheduled (if warranted) home visits which will also be a part of the support system provided.

**QUESTIONS TO THINK ABOUT**

**What are the rules of your home?**

Think about sharing your living space with a youth you don't know very well. Think about the rules and expectations that will be important for that person to know (i.e. no phone calls after 10 pm). The youth moving in will also have rules of his/her own (i.e. knock before you enter).

**What are your expectations of the youth while s/he lives with you?**

The Host Home Program is an opportunity for the youth to live in a stable environment while they work on self – determined goals (i.e. attending/finishing high school, getting their GED, securing a job, learning a skill or trade, paying rent). The youth and his/her case manager will develop a plan with clear goals that everyone formally agrees to (the youth, the hosts, the case manager, and the program manager). What expectations do you have for sharing your home with a youth who has different political or religious ideologies than you? If the youth is school aged, do you have an expectation that they should be attending classes?

**What is your financial commitment to this youth?**

You will be responsible for providing food for this youth for the duration of his/her stay. Expect your utility and groceries bills to go up. Aside from food and a safe home, you will not be responsible for other expenses. The case manager and program manager will work with you on setting appropriate boundaries around expenses.

**Is your living space ready for a young person?**

The youth must have his/her own room or private space. That room/space should be clean when the youth moves in. Make sure that your smoke alarms work and that you have accessible fire extinguishers. If you have alcohol in the house, it should be kept in a safe place where the youth is less likely to have access to it.

**Are you open to sharing your home with a LGBTQ youth?**

You would need to get acquainted with LGBTQ youth issues and explore your own feelings about sexual orientation and gender identity and learn to be able to talk about and deal with those issues. Even many people who identify as gay, lesbian or bisexual don't necessarily have much awareness about transgender issues.

**Have you explored (personally or otherwise) issues such as white privilege and racism?**

The majority of hosts in existing host home programs are white, whereas many of the youth experiencing homelessness in Minnesota are people of color. If you are white, it is extremely important that you become more aware of race, racism, and white privilege and the implications of living with that privilege. Talking about this will be part of the training.

**Are you willing to put in some time to create a nurturing relationship with a youth?**

Developing a trusting relationship with a youth may take some time and hard work. This may require you to be an active participant in that young person's life (i.e. driving him/her places, helping with schoolwork, meeting with case manager).

**Are you capable of living with a youth who may be working through difficult issues?**

You need to be conscious that the young people who participate in the host home program will come from all sorts of backgrounds and have lived through all sorts of experiences. Some have been abused, some are in recovery for substance abuse, and some have never had a healthy adult – youth relationship. These issues will also be discussed during the training.

**HOST VOLUNTEER APPLICATION**

|  |  |
| --- | --- |
| Date of Application: |  |

|  |
| --- |
| **PERSONAL INFORMATION:** |
| Name of Applicant (Last, First, MI) |  | Gender Identity |  | Birth Date (MM/DD/ YYYY) |
|  |  |  |  |  |
| Name of Co-Applicant, if any (Last, First, MI) |  | Gender Identity |  | Birth Date (MM/DD/YYYY) |
|  |  |  |  |  |

|  |  |
| --- | --- |
| Relationship of Applicants |  |

|  |  |
| --- | --- |
| Street Address |  |
| City |  | State |  | Zip Code |  |

|  |  |
| --- | --- |
| **Applicant Contact Information:** | **Co-Applicant Contact Information:** |
| Home Phone |  | Home Phone |  |
| Work Phone |  | Work Phone |  |
| Cell Phone |  | Cell Phone |  |
| eMail |  | eMail |  |
| What is the best way and time to contact you? |  |
| In what school district do you reside? |  |
| How long have you lived in Minnesota? | Applicant |  | Years |  | Months |
|  | Co-Applicant |  | Years |  | Months |
| In what other states have you lived in the past 10 years? |  |
| Applicant |  |
| Co-Applicant |  |

**FAMILY INFORMATION**

|  |
| --- |
| Please list all additional adults (other than applicants) and children in your home. |
|  | Name (Last, First, MI) |  | Relationship to Applicants |  | Gender |  | Birth Date(MM/DD/YYYY) |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |

|  |
| --- |
| **HOUSING INFORMATION:**Please check all of the following categories that apply to your home. |
|  | Owned |  | Rented |  | Single Family House |  | Mobile Home |
|  | Multi – Unit |  | Basement Unit |  | Second Floor Unit |  | Apartment/Condo |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| How long have you lived in your current home? |  | Years |  | Months |
| Do you have homeowner’s or renter’s insurance: |  | Yes |  | No |
| If yes, what is the name of your insurance company and your policy number? |
|  |
| Are you able to provide an extra bedroom/private space for a youth? |  | Yes |  | No |
| Are you planning to move within the next year? |  | Yes |  | No |

How much notice would you need for a youth to move in? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Between what hours can the Program Manager contact you about \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

a potential move-in?

Which host home program are you interested in? With ConneQT, please consider 3-4 youth a year (Check all that apply)

* + GLBT (Transitional living, average stay is about a year)
	+ ConneQT (urgent housing need, from 1 day to 3 months)

|  |
| --- |
| **REFERENCES:**List 2 references who have known you at least 1 year and 1 reference who has known you at least 5 years. If you are applying with another person, your reference should know both of your and how you function as a family. A letter will be sent to them with questions. |
|  | Name (Last, First, MI) |  | Email  |  | Relationship |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

*The following pages contain questions that are to be answered individually. There are two copies: one for the applicant and one for the co-applicant. If you are applying by yourself, please return the blank co-applicant form together with your completed application. Thank you!*

**APPLICANT**

|  |
| --- |
| Are you currently licensed as a foster parent (not a requirement for the Suburban Host Home Program)? |
|  | Yes |  | No | If yes, with what county/agency? |  |
| Do you have a current MN driver’s license? |  | Yes |  | No |  |
| If yes, what is your driver’s license number? |  |
| What is your car insurance company? |  |
| Are you bilingual or multilingual? |  |
| If yes, what languages do you speak? |  |
| To the extent that you are comfortable doing so, please describe how you self – identify (i.e. gender, sexual orientation, race, ethnicity, class): |
|  |
|  |

|  |
| --- |
| How would you characterize your comfort level people of any race, ethnicity, or social class?(Please circle a number below; 1 = not comfortable at all; 5 =completely comfortable) |
| 1 | 2 | 3 | 4 | 5 |
| How easy is it for you to talk about issues of race, ethnicity, and social class and privilege?(1 = not easy at all; 5 = extremely easy) |
| 1 | 2 | 3 | 4 | 5 |
| How would you characterize your comfort level with your sexual orientation and gender identity?(1 = not comfortable at all; 5 = completely comfortable) |
| 1 | 2 | 3 | 4 | 5 |
| How easy is it for you to talk about sexual orientation and gender identity issues?(1 = not easy at all; 5 = extremely easy) |
| 1 | 2 | 3 | 4 | 5 |

**EMPLOYMENT HISTORY**

|  |
| --- |
| Please provide your employment history for the past 5 years, starting with your most current job. |
| 1. | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 2. | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 3. | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 4. | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| If you are not currently working, what is your source of income? |  |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever been arrested by any law enforcement officer? |  | Yes |  | No |
| Have you ever been charged with any offense even if dismissed? |  | Yes |  | No |
| Have you ever been convicted of any offense? |  | Yes |  | No |
| Have you ever been charged with or convicted of an offense against a youth/minor? |  | Yes |  | No |
| Have you ever abused, neglected, or molested any child? |  | Yes |  | No |
| If you checked yes to any of the above, please explain the circumstances and dates: |
|  |
|  |
|  |
| Do you smoke? |  | Yes |  | No | If yes, do you smoke in your home? |  | Yes |  | No |
| Do you drink alcohol? |  | Yes |  | No |  |
| Do you have concerns about your drinking? |  | Yes |  | No |  |
| If yes, please explain why you are concerned: |
|  |
|  |
|  |
| Have you ever used illegal drugs? |  | Yes |  | No |  |
| If yes, do you currently use illegal drugs? |  | Yes |  | No |  |

|  |
| --- |
| **Please answer the following questions. You may use the back of the page if you need more space.** |
| 1 | Please write a little bit about why you are interested in hosting a young person in your home: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 2 | Please describe the age, gender, and other characteristics of a young person you would wish to host: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 3 | Please describe the characteristics of a young person you would not wish to host: |
|  |  |
|  |  |
|  |  |
|  |  |
| 4 | Please write about your strengths, skills and any other relevant information that you would like to share: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 5 | Please describe all physical and/or mental health problems or concerns in your family that could affect someone living in your home: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **CERTIFICATION** |
| I hereby certify that the facts contained in my application to the GLBT & ConneQT Host Home Programs are true and complete to the best of my knowledge. |
|  |
|  |  |  |
| Applicant Signature |  | Date |

**🡪 *Don't forget to fill out and sign the Authorization for criminal and civil record checks, complete your Letter to Youth Participants, and return them along with this application to:***

**Avenues for Homeless Youth**

**c/o GLBT & ConneQT Host Home Programs**

**1708 Oak Park Avenue North**

**Minneapolis, MN 55411**

***Thank you!!!***

*The following pages contain questions that are to be answered individually. There are two copies: one for the applicant and one for the co-applicant. If you are applying by yourself, please return the blank co-applicant form together with your completed application. Thank you!*

**CO-APPLICANT**

|  |
| --- |
| Are you currently licensed as a foster parent (not a requirement for the Host Home Programs)? |
|  | Yes |  | No | If yes, with what county/agency? |  |
| Do you have a current MN driver’s license? |  | Yes |  | No |  |
| If yes, what is your driver’s license number? |  |
| What is your car insurance company? |  |
| Are you bilingual or multilingual? |  |
| If yes, what languages do you speak? |  |
| To the extent that you are comfortable doing so, please describe how you self – identify (i.e. gender, sexual orientation, race, ethnicity, class): |
|  |
|  |

|  |
| --- |
| How would you characterize your comfort level people of any race, ethnicity, or social class?(Please circle a number below; 1 = not comfortable at all; 5 =completely comfortable) |
| 1 | 2 | 3 | 4 | 5 |
| How easy is it for you to talk about issues of race, ethnicity, and social class and privilege?(1 = not easy at all; 5 = extremely easy) |
| 1 | 2 | 3 | 4 | 5 |
| How would you characterize your comfort level with your sexual orientation and gender identity?(1 = not comfortable at all; 5 = completely comfortable) |
| 1 | 2 | 3 | 4 | 5 |
| How easy is it for you to talk about sexual orientation and gender identity issues?(1 = not easy at all; 5 = extremely easy) |
| 1 | 2 | 3 | 4 | 5 |

**EMPLOYMENT HISTORY**

|  |
| --- |
| Please provide your employment history for the past 5 years, starting with your most current job. |
| 1 | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 2 | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 3 | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| 4 | Occupation |  |
|  | Place of employment |  |
|  | City, State |  |
|  | Phone Number |  |
|  | Period Employed |  |
| If you are not currently working, what is your source of income? |  |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever been arrested by any law enforcement officer? |  | Yes |  | No |
| Have you ever been charged with any offense even if dismissed? |  | Yes |  | No |
| Have you ever been convicted of any offense? |  | Yes |  | No |
| Have you ever been charged with or convicted of an offense against a youth/minor? |  | Yes |  | No |
| Have you ever abused, neglected, or molested any child? |  | Yes |  | No |
| If you checked yes to any of the above, please explain the circumstances and dates: |
|  |
|  |
|  |
| Do you smoke? |  | Yes |  | No | If yes, do you smoke in your home? |  | Yes |  | No |
| Do you drink alcohol? |  | Yes |  | No |  |
| Do you have concerns about your drinking? |  | Yes |  | No |  |
| If yes, please explain why you are concerned: |
|  |
|  |
|  |
| Have you ever used illegal drugs? |  | Yes |  | No |  |
| If yes, do you currently use illegal drugs? |  | Yes |  | No |  |

|  |
| --- |
| Please answer the following questions. You may use the back of the page if you need more space. |
| 1 | Please write a little bit about why you are interested in hosting a young person in your home: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 2 | Please describe the age, gender, and other characteristics of a young person you would wish to host: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 3 | Please describe the characteristics of a young person you would not wish to host: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 4 | Please write about your strengths, skills and any other relevant information that you would like to share: |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 5 | Please describe all physical and/or mental health problems or concerns in your family that could affect someone living in your home: |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **CERTIFICATION** |
| I hereby certify that the facts contained in my application to the GLBT & ConneQT Host Home Programs are true and complete to the best of my knowledge. |
|  |
|  |  |  |
| Co-Applicant Signature |  | Date |

🡪 *Don't forget to fill out and sign the Authorization for criminal and civil record checks, complete your Letter to Youth Participants, and return them along with this application to:*

Avenues for Homeless Youth

c/o GLBT & ConneQT Host Home Programs

1708 Oak Park Avenue North

Minneapolis, MN 55411

*Thank you!!!*

**LETTER FROM VOLUNTEER HOSTS TO YOUTH PARTICIPANTS**

|  |
| --- |
| Please write a letter talking about yourself, your family, some of your life experiences, strengths, etc ... Write it with a young person (age 16 – 24) in mind as the reader. The purpose of this letter is for youth participants who are looking for a host to get to know you a bit, find out why you want to be a host, and decide if you might be someone s/he would like to live with. In addition, this letter will help the Host Home Programs have a better sense of you as a potential host volunteer. Be as creative as you would like to be! |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

AUTHORIZATION FOR CRIMINAL AND CIVIL RECORDS CHECK

Avenues for Homeless Youth

[1708 Oak Park Avenue North](http://maps.google.com/maps?f=q&source=s_q&hl=en&geocode=&q=1708+Oak+Park+Avenue+North,+Minneapolis,+MN&aq=0&sll=37.0625,-95.677068&sspn=56.06887,118.388672&ie=UTF8&hq=&hnear=1708+Oak+Park+Ave+N,+Minneapolis,+Hennepin,+Minnesota+55411&z=16)

Minneapolis, MN 55411

Phone: 612-522-1690 F

Fax: 612-522-1633

(please print)

**Last name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**First name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Middle:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Maiden, Alias, Former:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip Code

**Date of birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Gender:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Social Security Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Drivers License Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission for Avenues for Homeless Youth to obtain criminal and civil record checks from IntelliCorp Records Inc., the Minnesota Department of Human Services, Minnesota Department of Public Safety, Bureau of Criminal Apprehension, Criminal Justice Information Systems Section or other law enforcement agencies for the purpose of determining qualifications for volunteering with the GLBT & ConneQT Host Home Programs.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_