

**YOUTH APPLICATION FORM**

Hi!  We’re glad that you’re interested in our Host Home Programs (HHP), ConneQT HHP and GLBT HHP. We recognize that you are coming to us out of a ‘need’, not necessarily a ‘want’. We hold that recognition with respect, compassion, and solidarity. Should you choose to participate in host home, we promise to do our very best to share this part of your journey with you in ways that are supportive, but also rooted in our commitment towards a more just world. Thanks for taking this leap of faith with us. We look forward to getting to know you!

Here’s what you need to know:

**ConneQT** **HHP** **is emergency-based and short-term, with a stay between 1 day-3 months.**

**GLBT HHP is longer-term, with an average stay of 10-12 months.**

Please take some time to think about what program fits what your looking for and ultimately what you need. We encourage you to talk about both options with the advocate who referred you or with one of our youth advocate and engagement specialists, Kelly (ConneQT) or Rosie (GLBT).

Here are some initial questions that will help us figure out how best to move forward:

* Are you already working with either Rosie Benser, GLBT HHP YAES (Youth Advocate and Engagement Specialist) or Kelly Brazil, ConneQT HHP YAES?

            \_\_\_\_ yes       \_\_\_\_ no      If yes, for how long have you been working with them?

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

* Are you being referred to either ConneQt HHP or the GLBT HHP by a case manager/youth worker/advocate who is not Rosie or Kelly?

            \_\_\_\_ yes       \_\_\_\_ no

            If yes, what is their name and where do they work?

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*\*\*\*\*If you are****being referred****by a youth worker/case manager/advocate (not Rosie or Kelly), please give this form to them after you’ve completed it so they can send it to us along with the referral form.  Thanks!\*\*\*\*\**

*NOTE:*

***For those applying for GLBT HHP (longer-term):****If you have****no****youth worker/advocate and you are****self-referring****, please know that you will need to contact Rosie for the GLBT HHP and work with her for at least****one month****before being able to apply for the GLBT HHP.****Rosie’s number is 612-750-9503.****Thank you!*

***For those applying for ConneQT HHP (emergency, short-term):****If you are in need of emergency shelter/food/resources today please call Kelly as soon as possible.****Kelly’s number is 612-214-5964.****Thank you!*

**Now to the more interesting stuff (information about you)!**

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pronoun Used (he/him, she/her, they/them, other): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1) How do you self-identify (race, gender, ethnicity, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2) Where did you grow up? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3) What County do you currently live in? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

    How long have you been in **St. Paul**or **Minneapolis**(please circle which)? \_\_\_\_\_\_\_\_\_   **Other City:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4) Where are you currently living (i.e. friend’s house, shelter, family, foster care, squat)?

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5) Do you have a **GED**or **high school diploma**(please circle which)? \_\_\_\_ yes    \_\_\_\_ no

 If yes, from where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6) What is your current income? (This will not affect your eligibility to be in either host home program) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7) What are some of the things you are now working on (i.e. trying to get a job, GED)?

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8) Why did you pick either the GLBT HHP or ConneQT HHP over other housing programs?

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9) How do you think the GLBT or ConneQT Host Home Program will support you?

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10) What are some of the strengths that you would bring into either program (i.e. great sense of humor, artistic abilities, hard work)?

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11) Are you willing to develop a goal plan and work towards your goals together with your YAES/advocate and host volunteers? \_\_\_\_ yes    \_\_\_\_ no

12) What kind of host volunteers would you like to live with?

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13)  Do you have any allergies? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14)  Once you’re in a host home, who would you like us to contact in case of an emergency?

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15)  Do you have any outstanding citations/warrants?  \_\_\_\_ yes    \_\_\_\_ no   \_\_\_\_ don't know

***Our YAES will need to check this before you can move into a host home and, if there is one, assist you with next steps.***

**RELEASE OF INFORMATION**

Please sign here to authorize your advocate/agency, the Host Home Program staff and potential hosts to respectfully share relevant information about you with each other.  This will help us find the best match possible for you and also provide you with on-going support.  Thank you.

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

\*If you are self-referring or already working with Rosie or Kelly, please contact them so you can give them this completed form.    If not, please have your youth worker/advocate send this completed form along with his/her/their completed referral form to:

|  |  |
| --- | --- |
| **GLBT Host Home Program:**  Rosie Benser  Avenues for Homeless Youth  1708 Oak Park Ave. N.  Minneapolis, MN 55411  Ph 612-750-9503, Fax 612-214-5964, or email to  Rosie at [rbenser@avenuesforyouth.org](mailto:rbenser@avenuesforyouth.org) | **ConneQT Host Home Program:**  Kelly Brazil  Avenues for Homeless Youth  1708 Oak Park Ave. N.  Minneapolis, MN 55411  Ph 612-214-5964, Fax612-214-5964, or email to  Kelly at [kbrazil@avenuesforyouth.org](mailto:kbrazil@avenuesforyouth.org) |

**GRIEVANCE**

If you have a grievance about this program, please speak to your case manager.  They can help you set up a time to talk with Katherine Meerse, Executive Director of Avenues for Homeless Youth to discuss your grievance.