

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**AGENCY- PROGRAM PROFILE**

IMPLEMENTING AGENCY:
PROGRAM TITLE:

<input type="checkbox"/> Direct Services will not be provided by this program	Projected Total Program Enrollment _____	Projected Daily/Weekly/Monthly Attendance _____
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Use whole numbers when entering information for Gender, Ethnicity, Ages, and Target Population areas, NOT percentages.

<b>GENDER OF PROGRAM PARTICIPANTS:</b> <i>(Enter number participants per gender)</i>		MALE _____	FEMALE _____
<b>ETHNICITY:</b> <i>(Enter number of participants per ethnic group)</i>	WHITE _____	BLACK OR AFRICAN AMERICAN _____	HISPANIC OR LATINO _____
	AMERICAN INDIAN OR ALASKAN NATIVE _____	ASIAN _____	TWO OR MORE RACES _____
	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER _____		
<b>AGES</b>	0-4 _____	5-9 _____	10-14 _____ 15-17 _____ 18-20 _____
<b>IS TARGET POPULATION SERVING DISCONNECTED YOUTH:</b> <i>(Enter number of participants per population described)</i> <input type="checkbox"/> No <input type="checkbox"/> Yes			
<b>IF "YES",</b> Youth aging out of foster care _____ Children of incarcerated parents _____			
Youth in the juvenile justice system who re-enter the community _____ Runaway and Homeless Youth _____			

Please describe (in 100 words maximum per feature) how the program for which you are requesting funding addresses each of the Features of Positive Youth Development settings below.

Features of Youth Development Settings (School, Home and Community)	Please describe how the program for which you are requesting funding addresses each of the Features of Positive Youth Development settings.
<p><b>Physical &amp; Psychological Safety</b> Safe and health-promoting facilities; practices that increase safe peer group interaction and decrease unsafe or confrontational peer interactions.</p>	
<p><b>Appropriate Structure</b> Limit setting; clear and consistent rules and expectations; firm enough control; continuity and predictability; clear boundaries, and age appropriate monitoring.</p>	

IMPLEMENTING AGENCY:

PROGRAM TITLE:

**Supportive Relationship**

Warmth; closeness; connectedness; good communication; caring; support; guidance; secure attachment, and responsiveness.

**Opportunities to Belong**

Opportunities for meaningful inclusion, regardless of one's gender, ethnicity, sexual orientation, or disabilities; social inclusion, social engagement, and integration; opportunities for socio-cultural identity formation; and support for cultural and bicultural competence.

**Positive Social Norms**

Rules of behavior, expectations, injunctions, ways of doing things, values and morals, and obligations for service.

**Support for Efficacy & Mattering**

Youth-based; empowerment practices that support autonomy; making a real difference in one's community, and being taken seriously. Practices that include enabling, responsibility granting, and meaningful challenge. Practices that focus on improvement rather than on relative current performance levels.

IMPLEMENTING AGENCY:
PROGRAM TITLE:

**Opportunities for Skill Building**

Opportunities to learn physical, intellectual, psychological, emotional, and social skills; exposure to intentional learning experiences, opportunities to learn cultural literacy, media literacy, communication skills and good habits of mind; preparation for adult employment, and opportunities to develop social and cultural capital.

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**Integration of Family, School & Community Efforts**

Concordance; coordination and synergy among family, school and community

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**Monitoring & Evaluation Methods**

(Please describe in 100 words or less)

**Monitoring and Evaluation Methods**

Describe the process to be used to monitor on a regular basis. Include who is responsible, frequency, and documentation of monitoring activities. Describe the process to be used to evaluate attainment of objectives. Include what will be measured, who will conduct the evaluation, when it will be conducted, and how results will be used

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