

NYS MEP – Out-of-School Youth Profile & Personal Learning Plan

Date: <input style="width:80%;" type="text"/>	METS Project: <input style="width:95%;" type="text"/>	COE#: <input style="width:95%;" type="text"/>
Name: <input style="width:95%;" type="text"/>		<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other
Address/Camp: <input style="width:95%;" type="text"/>		Age: <input style="width:50%;" type="text"/>
Phone: <input style="width:95%;" type="text"/>		
Last Grade Attended: <input style="width:50%;" type="text"/>	Year: <input style="width:50%;" type="text"/>	Where: <input style="width:95%;" type="text"/>
Oral English Language Proficiency (Speaks English): <input type="checkbox"/> Yes: <input type="checkbox"/> Minimum <input type="checkbox"/> Adequate <input type="checkbox"/> No		Home language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>
Health Needs: <input type="checkbox"/> N/A <input type="checkbox"/> Medical <input type="checkbox"/> Vision <input type="checkbox"/> Dental <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>		Advocacy Needs: <input type="checkbox"/> Legal <input type="checkbox"/> Childcare <input type="checkbox"/> Access to technology <input type="checkbox"/> Translation/Interpretation <input type="checkbox"/> Mental Health/Counseling
Preferred Communication Method (Email, Phone, Text, Facebook, WhatsApp, etc.) <input style="width:95%; height:30px;" type="text"/>		
Based on the information collected above, the youth is: <input type="checkbox"/> Here-to-work <input type="checkbox"/> Recovery		

Check all that apply in the categories below.

<p>Expressed interests in:</p> <input type="checkbox"/> Learning English <input type="checkbox"/> Job Training <input type="checkbox"/> High School Equivalency <input type="checkbox"/> Earning a diploma <input type="checkbox"/> Not sure <input type="checkbox"/> No interest <input style="width:80%;" type="text"/> <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>	<p>Availability:</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Sun</th> <th>Mon</th> <th>Tues</th> <th>Wed</th> <th>Thurs</th> <th>Fri</th> <th>Sat</th> </tr> </thead> <tbody> <tr> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> <td>M <input type="checkbox"/></td> </tr> <tr> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> <td>A <input type="checkbox"/></td> </tr> <tr> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> <td>E <input type="checkbox"/></td> </tr> </tbody> </table> <p>M = Morning, A = Afternoon, E = Evening</p>	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	A <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>
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<p>Has access to transportation: <input type="checkbox"/>Yes <input type="checkbox"/>No </p> <p>Housing - Youth lives:</p> <input type="checkbox"/> With a crew <input type="checkbox"/> With friends outside of work <input type="checkbox"/> With his/her parents/family <input type="checkbox"/> With spouse & kids <input type="checkbox"/> With kids <input type="checkbox"/> Alone	<p>Reason for leaving school:</p> <input type="checkbox"/> Insufficient credits <input type="checkbox"/> Needed to work <input type="checkbox"/> Missing State test requirements <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>																												
<p>Youth may be a candidate for:</p> <input type="checkbox"/> High School Diploma <input type="checkbox"/> Health Education <input type="checkbox"/> High School Equivalency <input type="checkbox"/> Job Training <input type="checkbox"/> HEP <input type="checkbox"/> Career Exploration <input type="checkbox"/> Adult Basic Education <input type="checkbox"/> Life Skills <input type="checkbox"/> ESL <input type="checkbox"/> PASS <input type="checkbox"/> CAMP <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>	<p>At interview, youth received:</p> <input type="checkbox"/> Educational materials <input type="checkbox"/> Support services <input type="checkbox"/> OSY welcome bag <input type="checkbox"/> Referral(s) (list in comments) <input type="checkbox"/> Other: <input style="width:80%;" type="text"/>																												

Comments:

METS Staff Name/Signature