



## Older Youth Needs and Resources Assessment

### ***Instructions***

- ***\*\*This assessment should be completed within 90 days of being appointed to your case or when the youth on your case turns 15.\*\****
- This assessment is designed to provide information on the areas of need for the older youth on whose behalf you're advocating.
- This form should be completed by you (the CASA volunteer) after you have had a chance to speak with your teen/s about their situation and wishes. Some of the questions on this form may help guide conversations you have with your youth.
- Keep in mind that this is an instrument to help you in your advocacy for older youth; this is *not* a substitute for an independent living or transition plan. If your teen has questions about their independent living or transition plan, contact the Children's Division caseworker and/or their Chafee worker.
- For youth with special needs, there might be additional activities or benchmarks to consider. Use the blank space to add these.
- For recommendations on resources and support for teens in foster care in Jasper County, contact Jasper County CASA and ask to be connected to the Fostering Futures Coordinator.

### **Basic Information:**

Volunteer Name: \_\_\_\_\_

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

Youth's Name: \_\_\_\_\_

Youth's Age/DOB: \_\_\_\_\_

CASA/GAL Program Name: Jasper County CASA

<b>Education</b>			
	Yes	No	N/A
Youth is enrolled in school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a person to help him or her make decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has an academic plan with academic-related goals for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is literate and has the ability to read and write.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth plans to attend college or a vocational school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has copies/access to educational records.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth needs tutoring services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If needed, youth is receiving tutoring services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has knowledge of financial assistance she or he may have access to in order to pursue post-secondary education/training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has an individual identified to assist with post-secondary education planning, applications and financial aid assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has documents needed to apply for financial aid and scholarships, including birth certificate and proof of child welfare involvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the educational needs of the youth:			

<b>Employment</b>			
	Yes	No	N/A
Youth has participated in a vocational assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has expressed wanting a job and has established employment goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has developed a resume.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has at least two people from whom he or she may obtain references for employment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has filled out a job application.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has adequate interviewing skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has appropriate clothing for a job interview.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has been involved in volunteer service or an internship.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a telephone number, email address, library card and personal calendar for appointments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a social security card, birth certificate and other important documentation for employment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the employment needs of the youth:			

<b>Housing</b>			
	Yes	No	N/A
Youth has been exposed to life skills topics including housing issues, budgeting and independent living.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understands the concept of independent living.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has been exposed to information on legal rights and responsibilities regarding housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is able to create and maintain a budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a plan for permanent housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is connected to a person who can help conduct a housing search.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has knowledge of financial assistance she or he may have access to in order to pursue housing/independent living.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the housing needs of the youth:			

<b>Life Skills</b>			
	Yes	No	N/A
Youth knows how to make healthy decisions and advocate on her or his own behalf.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth knows the physical, social, emotional and legal risks associated with alcohol, drug and tobacco use and understands the impact of peer pressure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth can make well thought-out decisions and can problem solve.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth knows how to appropriately respond to prejudice and discrimination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understands the importance of good hygiene.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth knows how to stay healthy and care for minor illnesses.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understands the basic concepts of nutrition and knows how to prepare basic meals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understands services provided by a bank such as checking and savings accounts and how to make a basic budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a checking or savings account.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a driver's license.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life skills will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the life skills needs of the youth:			

## Supportive Relationships/Community Resources

	Yes	No	N/A
Youth has at least one meaningful connection with an adult in whom he or she can trust.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is connected to at least one adult mentor, not including the youth's attorney, social worker or independent living coordinator.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a healthy connection to at least one peer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has contact information of community legal resources, attorneys, case workers and mentors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has the ability/opportunity to create, maintain and strengthen supportive and sustaining relationships with foster families and significant others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has the ability/opportunity to create, maintain and strengthen supportive and sustaining relationships with members of his or her birth and kinship families, including parents and siblings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a healthy sense of ethnicity, cultural identity and personal identity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understands civic responsibility and is registered to vote.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationships and resources will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the relationship/resource needs of the youth:			

<b>Physical/Behavioral Health</b>			
	Yes	No	N/A
Youth has had a comprehensive screening to assess physical health, developmental needs, mental health and substance abuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has been exposed to information about healthy social relationships, home safety and preventing accidents/violence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has an understanding of issues related to STIs and HIV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has the skills to maintain good emotional and physical health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has a copy of all medical, dental and mental health records.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth has information and appropriate understanding of any ongoing medical, dental or mental health conditions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth knows what medications (if any) she or he is currently taking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is covered by Medicaid or another insurance plan (currently).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth will be covered by Medicaid or another insurance plan (once he or she emancipates from the system).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth understand what (if any) SSI benefits she or he is eligible for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth knows and understands when and how to seek medical attention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth is connected to a "clinical home" as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health will be one focus of my work, advocacy and action planning with this youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments regarding the health needs of the youth:			

