NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

AGENCY- PROGRAM PROFILE

IMPLEMENTING AGENCY:
PROGRAM TITLE:

SITE INFORMATION Most Significant *(3 Maximum)*	
Type	**Address** ***(street, city, state, zip)***

Projected total program enrollment	**Projected daily attendance**

PROGRAM SUMMARY: (maximum of 100 words)

Please use whole numbers not percentages. Please note, residential programs may only serve young adults 21-24 if certified to do so and such services have been documented.

GENDER OF PROGRAM PARTICIPANTS, ETHNICITY AND AGES: (Enter basic demographic information for Gender, Ages and Target population)	Male	Female

ETHNICITY: *(Enter number of participants per ethnic group)*	WHITE _____	BLACK OR AFRICAN AMERICAN _____	HISPANIC OR LATINO _____
		AMERICAN INDIAN OR ALASKAN NATIVE _____	ASIAN _____
		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER _____	TWO OR MORE RACES _____

AGES	0 - 4		5-9		10-14		15-17		18-20		21 +	

IS TARGET POPULATION SERVING DISCONNECTED YOUTH: *(Enter number of participants per population described)*	☐ No	☐ Yes

IF *"YES",*	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.

Physical & Psychological Safety Safe and health-promoting facilities; practices that increase safe peer group interaction and decrease unsafe or confrontational peer interactions.	

IMPLEMENTING AGENCY:
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Appropriate structure Limit setting; clear and consistent rules and expectations; firm enough control; continuity and predictability; clear boundaries, and age appropriate monitoring.	
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.	

IMPLEMENTING AGENCY:
PROGRAM TITLE:

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.	
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.	
Integration of Family, School & Community Efforts Concordance; coordination and synergy among family, school and community.	

Monitoring & Evaluation Methods	(Please describe in 100 words or less)
Monitoring is defined as a systematic review of a funded program based upon the requirements of a contract, rules, regulations, policies and/or State and Local laws. It identifies the degree to which a program or operation accomplishes the activities specified in a contract/application and how it complies with requirements. Describe your process to be used to monitor on a regular basis. Include who will be responsible, frequency, and documentation of monitoring activities.	
Evaluation Methods is the process to determine the value or amount of success in achieving a pre-determined program or operational goal. Evaluations can identify program strengths and weaknesses to improve the program. Evaluations can verify if the program is really running as originally planned. Describe the process to be used to evaluate the attainment of the 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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INDIVIDUAL PROGRAM APPLICATION

Agency-Program Profile Instructions

Implementing Agency: Enter name of incorporated agency responsible for program.

Program Title: Enter the title of the program.

Site Information: Please enter up to three (3) of the most significant sites for this program. Must use the following types only: Agency, Athletic Fields, Campsite, Church, Community/Youth Center, Gym, Housing Project, Library, Office, Playground, Pool, Program, School/Classroom, or Shelter.

Projected Total Enrollment: With knowledge of the community to be served and/or history providing programming in the community, please use your best projections on the data required. **Please use whole numbers, not percentages.**

Projected Daily Attendance: Use your best projections on this data. If you checked other on the 5001 please provide the projected attendance on the day that the program operates (i.e. once a week, two days a week, once a month). **Please use whole numbers, not percentages.**

Program Summary (Maximum 100 words): Include in your summary; TARGET POPULATION-the characteristics of the youth to be served; GEOGRAPHIC AREA-physical boundaries (i.e. school district, village, town, city, county, etc.) in which the program will operate; and SERVICE METHODS-key services and activities to be used.

Gender of Program Participants, Ethnicity, and Ages: Enter basic demographic information on the programs target population. Please use whole numbers, not percentages. Please note residential programs may only serve young adults aged 21-24 if certified to do so and such services have been documented.

Disconnected Youth: This should be checked yes only if you can document that you are serving that particular population. Please refer to the website resources section on this document for further explanation on Disconnected Youth. **Please use whole numbers, not percentages.**

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

The Features of Positive Development Settings are processes or “active ingredients” that community programs should use in designing programs to facilitate positive youth development. We stress that the implementation of these features need to vary across programs precisely because they have diverse clientele and different constraints, resources, and goals (source: Community Programs to Promote Youth Development, National Research Council, Institute of Medicine).

MONITORING AND EVALUATION

Monitoring: Describe the process to be used to monitor **the program** on a regular basis. Include who will be responsible, frequency, and how you document monitoring activities. (See Monitoring Manual for Youth Bureaus for more information on monitoring)

Evaluation Methods: Describe the process to be used to evaluate the attainment of the **program** objectives. Include what will be measured, who will conduct the evaluation, when it will be conducted, and how results will be used. Please refer to the website resources section on this document for further explanation on Program Evaluation.