



Solutions for Out-of-School Youth (SOSY)
OSY STUDENT PROFILE



Date:		MEP Project Region:		COE# or MEP ID:	
Name:			<input type="checkbox"/> Male	<input type="checkbox"/> Female	Age:
Address/Camp:		Phone:		Optional: How long is youth planning on being in the area?	
Last grade attended:		Where:			Year:
English oral language proficiency: <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/> None			Home language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other:		
Health needs: <input type="checkbox"/> Medical <input type="checkbox"/> Vision <input type="checkbox"/> Dental <input type="checkbox"/> Urgent <input type="checkbox"/> Other:					
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.

Expressed interests in: <input type="checkbox"/> Learning English <input type="checkbox"/> Job training <input type="checkbox"/> GED <input type="checkbox"/> Earning a diploma <input type="checkbox"/> Not sure <input type="checkbox"/> No interests <input type="checkbox"/> Other:		Availability: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends <input type="checkbox"/> Other:	
Has access to transportation: <input type="checkbox"/> Yes <input type="checkbox"/> No		Reason for leaving school: <input type="checkbox"/> Lacking credits <input type="checkbox"/> Needed to work <input type="checkbox"/> Missed State test <input type="checkbox"/> Other:	
Housing – Youth lives: <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			
Youth is a candidate for: <input type="checkbox"/> HS diploma <input type="checkbox"/> Pre GED/GED <input type="checkbox"/> HEP <input type="checkbox"/> Adult Basic Ed. <input type="checkbox"/> ESL <input type="checkbox"/> CAMP <input type="checkbox"/> Other:		<input type="checkbox"/> Health Education <input type="checkbox"/> Job training <input type="checkbox"/> Career exploration <input type="checkbox"/> Life skills <input type="checkbox"/> PASS <input type="checkbox"/> MP3 Player	
At interview, youth received: <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:			
Comments:			