Dear Interested Participant:

Welcome to Youth Guidance! You have received this registration packet because you either want to participate in a Youth Guidance (YG) program or because someone has made a referral for you to participate in a YG program. YG provides a variety of programs and services – including Becoming a Man (BAM), Working on Womanhood (WOW), Counseling, Project STRIVE, Project Prepare, Project Prepare Blue, and Community and After School Programs. Most YG programs are delivered in schools, however, some programs are delivered in community settings. More detailed information about the program can be found at the following web address: https://www.youth-guidance.org/register

You must enroll and provide your consent to participate in the program. To do so, you must complete and sign the “Youth Guidance Program Registration and Consent for Services Form” in this packet.

This packet provides detailed information you need to know before enrolling and consenting to participate. We recognize that there is A LOT of information in this packet, but it’s important that you understand what it means to participate in a YG program, what your rights and responsibilities are, how and why we collect different kinds of information about the youth we serve, and how we use that information. In addition, because we sometimes share information with other organizations, we want to make sure you understand what we do in those situations to protect the privacy and confidentiality of our participants. If you have any questions about the program you are enrolling in or about the information in this packet, please contact the YG staff member working with you or the main YG office at 312-253-4900 or clientsupport@youth-guidance.org.

**Steps to Enroll in a Youth Guidance Program:**

1) Read this information packet

2) Fill out the **Youth Guidance Program Registration and Consent for Services Form**.
   a. Please note that to enroll, you must select “Yes” to #1 on the bottom of the form. However, you may select “No” to #2 and #3 and you may still participate.
   b. Please complete all fields on the form.

3) Read the **Youth Guidance Program Registration and Consent for Services Form** and indicate your decision whether or not to allow your academic data to be used as part of our internal evaluation.

4) Sign the bottom of the **Youth Guidance Program Registration and Consent for Services Form** and return it to the Youth Guidance staff member working with you.
PARTICIPANT RIGHTS, EXPECTATIONS, AND RESPONSIBILITIES

Youth Guidance will not release any personally identifiable information about individuals, households, or businesses to law enforcement agencies such as ICE, INS, DHS, or similar unless required to do so by federal law. Participating in Youth Guidance programs will not affect anyone’s application for change in legal status.

If you have any questions about the program you are enrolling in or about the information listed in this packet, please contact the YG staff member working with you, the YG main office by phone at 312-253-4900, or clientsupport@youth-guidance.org.

RIGHT TO FAIR AND APPROPRIATE SERVICES

- YG provides service to any eligible participant who meets program requirements regardless of race, disability, color, creed, religion, sex, gender identity, age, national origin, ancestry, citizenship, veteran status, sexual orientation, or other related factors and legally protected characteristics. We will make every effort to communicate with participants in a familiar language and use communication technology to address difficulties in hearing and sight.
- Program participants have the right to be free from abuse, neglect and exploitation.
- Program participants will have services provided in the least restrictive setting.
- Program participants have the right not to be denied, suspended, or terminated from services or have services reduced by exercising any rights.
- Program participants have the right to accommodation for their disabilities as required by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and state laws where we are providing services.

RIGHT TO REFUSE TREATMENT

- Adult participants have the right to take away consent for services at any time by completing YG’s Removal of Consent Form, which can be provided to you by any YG staff member or by emailing clientsupport@youth-guidance.org.
  Please note that if consent is removed, the participant will no longer be able to participate in the YG program.

RIGHT TO CONFIDENTIALITY

- Program participants have the right to expect their conversations or records of conversations they have with YG staff members will remain confidential, except under these circumstances:
  - If a participant indicates that they may pose a danger to themselves or to others, the YG staff person is obligated to report it as required under state and federal law.
  - If a participant indicates that someone else is hurting or going to hurt them, including if a YG staff member suspects child abuse or neglect.
  - If YG receives a court order to release information about a participant, YG is obligated to honor it.
  - If the parent/guardian or adult participant submits a request for or authorizes YG to disclose information to a third party such as Medicaid (where appropriate) or insurance provider.
- YG may provide some information about the participant’s program participation with the staff at the school. For more information see the section under Data Practices at YG below titled, “With whom outside of YG might we share limited personal information?”
- Depending on the type of services being provided and the setting in which they are provided, the right of a YG participant to confidentiality shall be governed by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Family Educational Rights and Privacy Act (FERPA), and/or any applicable state privacy and confidentiality laws. Please see the “Data Practices at Youth Guidance” section below for more information about how data is collected and used at YG.
- Participants and parents/guardians of participants under 18 have the right to look at any of the information YG shares with the school and to talk with the YG staff member working with the participant about what information they are sharing.
- Our agency reserves the right to change its privacy policy based on the needs of the agency and changes in state and federal law.
RIGHT TO FILE COMPLAINTS AND GRIEVANCES

- Adult participants have the right to file a grievance or complaint if they feel that the participant has not received proper treatment, YG has failed to respond to the participant’s rights requests, or YG has not complied with federal or state privacy laws. For information about this process, please review the Service Appeal and Client Grievance Procedure section of this packet.

PARTICIPANT EXPECTATIONS AND RESPONSIBILITIES

- YG participants are expected to demonstrate respect for themselves and others at all times.
  - The following actions or behaviors are prohibited: abusive or harmful language; physical aggression; bullying; taking someone else’s property.
- Unless they are given specific permission from the YG staff member working with them, participants are NOT permitted to use electronic devices during YG programs, including: cell phones, portable music players, headphones, hand held gaming devices, personal computers, and the like. Unauthorized items may be confiscated by program staff and returned at the appropriate time.
  - YG is not responsible for lost or stolen items.
- YG program participants being served in schools are expected to complete all school-related work and assignments if they are pulled from a class to participate in the YG program.
- YG program participants being served in schools are expected to follow the school’s behavioral guidelines and the school district’s Code of Conduct at all times. The school district Code of Conduct is available from the school’s main office, the YG office, or by visiting the school district’s website.
- Participants must not be in possession of any school district contraband items, such as cigarettes, vaping devices, drugs, weapons, etc.

TELEBEHAVIORAL HEALTH SERVICES

- Although most services YG provides occur in schools or other community sites, some services may be offered remotely, especially in cases when schools are shut down (such as COVID-19). In those cases, participants may receive services through phone calls, text, apps, or video conferencing technologies. This is called telebehavioral health.
- The laws and professional standards that apply to in-person behavioral services also apply to telehealth services. The technologies YG uses in telebehavioral health use network and software security to protect the confidentiality of participant information. These security measures are there to safeguard personal information. However, it is still the responsibility of the participant to maintain privacy on their end of communication. For example, participants may want to be sure they are in a private place if personal information is discussed.
- YG will only provide telebehavioral health services through technologies and apps allowed by the school district where the participant is enrolled, and we will follow all applicable government and school district acceptable use policies. Participants receiving these services will need access to the appropriate technology in order to participate. That may include a computer with a camera and microphone and a reliable internet connection, or a smart phone with a sufficient data plan to support a video conference.
- Participants may decline any telebehavioral health services at any time without jeopardizing their access to future services.

DATA PRACTICES AT YOUTH GUIDANCE

Youth Guidance uses data including personal information to continually track the progress and outcomes of our programs to ensure we are providing high-quality services to our participants. It is important that participants and parents/guardians know what information is being collected at YG, how it is being used, and how we protect the privacy and rights of our participants.

- What Personal Information is Collected by YG?
  - Enrollment and Participation Data: YG staff record data in a YG record-keeping system. This includes personal information (e.g., name, address, birthdate, student ID number) and a record of the services they provide to participants (for example attendance in our sessions, and notes about the sessions). This helps our staff understand the needs of our programs and the progress our participants are making.
Experience and Satisfaction with the YG Program: We may ask participants to complete surveys so we can better understand their experience and satisfaction with the program. The surveys are voluntary and may be administered at the end of the school year. The participant may still participate in the program if they choose not to complete a survey.

Social and Emotional Well-Being: Depending on what program the participant is in, we may ask them to complete surveys about their social-emotional skills, outlook on school and life, and relationships with peers and adults. Our counseling programs may also include questions about trauma, depression, anxiety, emotional regulation, self-esteem, and/or aggressive behaviors. Surveys about social and emotional well-being are voluntary and may be administered at the beginning and end of the school year. The participant may still participate in the program if they choose not to complete a survey.

Teacher/School Staff Feedback and Academic Information: The YG staff member might need to gather information about how a participant is doing in school by talking with school staff members such as teachers, counselors, and/or social workers. The staff member might also collect information – such as attendance records and grades - from the participant’s school about how they are doing in school. This information will be used by the YG staff member to see if there are ways that we can help the participant do better in school and/or in the YG program. All information collected this way, both documents and conversations, will be kept confidential.

Academic Records: YG analyzes academic data (e.g., attendance, grades, school conduct) to help us understand if participating in YG programs helps youth do better in school. In order to collect this data from the school district, YG needs parent/guardian or adult participant permission. Separate consent is required for the collection of this data, which is found on the back of the Youth Guidance Program Registration and Consent for Services Form. The participant may still participate in the program whether or not you decide to give your permission for YG to collect your academic data.

• How Does YG Collect Personal Information About Participants?
  In order to provide services, YG collects personal information from: parents and guardians or the adult participant during the registration process; participants themselves throughout the course of the program via personal interactions and surveys completed through the course of the program; and teachers, school staff, and district staff through discussion and data requests.

• How Does YG Use the Personal Information it Collects?
  Meeting Client Needs: The information collected from participation records and surveys allow YG to better understand the individual needs of participants, as well as the progress they make in the program.

  Continuous Improvement: YG looks at data trends to understand whether our programs are being run effectively and if youth are experiencing benefits from participating in them. The overall results (not individual data) are shared with program leaders to understand ways we can improve our programs.

  Reports to Community Supporters and Funders: YG relies on a wide variety of funding sources to operate our program. We provide summary reports about our programs to our funders and agency partners. These reports include only summaries of results and never include anything that would identify an individual participant. Results from these reports may also be shared on YG’s website or other social media.

• Who at YG has Access to the Personal Information Collected about Program Participants?
  All YG staff members who have access to participant data are trained in client and data privacy practices and are required to adhere to them.

  YG Program Staff: YG staff members, including counselors and youth workers who meet with participants on a regular basis – as well as their supervisors, coaches, and/or managers – will be able to see the service records, survey responses, and academic data provided by the school. Other YG staff may also access this information on a strictly as-needed basis.

  YG’s Evaluation and Quality Improvement Staff: Members of YG’s Department of Evaluation and Quality Improvement have access to all of the data collected, as they are responsible for managing, analyzing, and reporting on all of the data collected by YG staff.
• With whom outside of YG might we share limited personal information?
  
  **School Staff and Social Service Partners:** When appropriate, YG staff may tell staff at the school (or site where the program is held) and/or other social service partners involved in our programs that a youth is participating in a YG program. To best serve the participant, we may also talk with these individuals about what and how the participant is doing in the program. Private details about participants and their experiences in the program will not be shared.

  **School Districts:** YG provides school-based services and it is sometimes necessary to share program enrollment, demographic information, and attendance records with the school district. In these cases, YG ensures that data is being entered into a school district-approved system that is only accessible by individuals who have school district approval to see that data. It is important to note that when we share data with the school district, the data then becomes a part of the student’s academic record and therefore the privacy of that data is maintained by the district under its policies and practices.

  **Community Partners:** YG works with a variety of funders and organizations to operate and evaluate its programs. Sometimes, these partnerships require that we share participant data and/or that we enter participant information into partners’ documentation systems. For example, some of our contracts require us to document participant information including program enrollment, demographic information and attendance records, into systems that are accessible by approved staff members of those community partners. Whenever data is shared with outside partners, it is done so in a way that protects our participants’ privacy. We will only share data with partners who sign a data sharing agreement with YG which includes the requirement that partners keep the information confidential and abide by relevant state and federal policies around data and privacy practices.

  **External Researchers Studying YG’s Programs:** On occasion, YG works with research partners to evaluate the success of our programs and publish research papers and reports that improve knowledge to the general public about programs like ours. Any research that takes place with YG participants will first be approved by the YG executive team and a government-approved Institutional Review Board (IRB).

  Sometimes participation in research means we would share data collected by YG staff with external research partners. However, we would only do so with partners who have signed a data sharing agreement as described above. Sometimes, research conducted on YG programs requires a separate consent from the parent/guardian and the participant, depending on their age. If a participant’s program will be a part of a research study that requires a separate consent, the parent/guardian, adult participant, and/or youth participant will be asked to voluntarily provide a separate consent for their participation in the research. If the parent/guardian or the participant declines research participation, it will not impact their eligibility to participate in the program.

  **Third party payers for medical services:** Some YG services may be paid for by third party payers, such as Medicaid or insurance providers. In those cases, with the permission of the parent/guardian or adult participant, client records that are used to bill for these services will be shared with those payers. If the participant is eligible, you will receive additional information and consent forms.

• What are the Parent/Guardian’s and Participant’s Rights Regarding the Personal Information YG Collects?
  
  **Right to Know:** Parents/Guardians or adult participants have the right to be notified each year of their rights under FERPA, HIPAA, and applicable state laws.

  **Right to View:** Parents/Guardians or adult participants have the right to look at any of the information YG shared with the participant’s school and to talk with the YG staff member working with the participant about what information they are sharing with the school.

  **Right to Correct:** Parents/Guardians or adult participants may request a correction to incorrect, inaccurate, or misleading personal information YG has about the participant. Also, they may request that the participant’s personal information be deleted or removed from YG’s records. To do so, parents/guardians or adult participants may contact us at 312-253-4900 or clientsupport@youth-guidance.org. Please know that YG may have legal, regulatory, or compliance obligations or reasons to keep the information as is and not make the requested changes or deletions.
Right to Decline or Remove Consent: By providing consent for services, a parent/guardian or adult participant is also consenting to YG’s data practices as described in this document. However, a parent/guardian or adult participant has a right to take away consent at any time by completing YG’s Removal of Consent Form, which can be provided by any YG staff member or via email request to clientsupport@youth-guidance.org. However, by declining or removing consent, YG will not be able to provide the participant with further services.

Right to Complain: Parents/Guardians or adult participants have the right to file a complaint about YG’s alleged failure to respond to their rights or comply with federal or state privacy laws. For information about this process, please review the Service Appeal and Client Grievance Procedure in this packet.

- How Long Does YG Keep the Personal Information?
  YG keeps the personal information for as long as is necessary for the purpose(s) for which we collected it, or for our other legitimate business purposes, including to meet our legal, regulatory, or other compliance obligations.

- How May I Contact YG about its Data Practices?
  If you have any questions about YG’s data practices, including how we use, manage, and protect data, please contact us at 312-253-4900 or clientsupport@youth-guidance.org.

HOLISTIC STUDENT ASSESSMENT (ONLY applicable for BAM Participants)

Youth Guidance is excited to partner with the Partnerships in Education and Resilience (PEAR) to promote the positive social-emotional development for BAM participants. There is increasing evidence that helping students feel good about themselves, their school, and their relationships improves their overall wellbeing.

Youth Guidance, in collaboration with PEAR, will administer the Holistic Student Assessment (HSA) to BAM participants in grades 6-12. As part of this effort, you will be asked to complete a brief survey about yourself at the beginning and end of the school year. This information will help tailor support for your unique strengths and needs. There are no foreseeable risks involved with taking the HSA. We are requesting your permission for you to take the HSA as part of the BAM program. Even if you don’t give permission to take the HSA, you may still participate in the BAM program.

PEAR will be assisting the BAM program with the collection and analysis of HSA data to support these programs’ work. All HSA data securely managed by PEAR will be destroyed when no longer needed by the programs to guide services provided to you.

PEAR will use data from the BAM programs for research and educational work. Your name or other identifying information will never be used as part of this research. Nothing else will be asked of you as a participant in this research. All information will be kept confidential until it is destroyed by PEAR.

Please understand that participation is completely voluntary. You may withdraw your permission at any time and you may still participate in the BAM program. If you wish to see further description of the HSA, please review this HSA Definitions and Sample Items information sheet.

If you have any questions about this effort or would like to see a copy of this survey, you may contact Youth Guidance at (312) 253-4900 or clientsupport@youth-guidance.org.
Service Appeal & Client Grievance Procedure

The information contained in this packet is specific to the Youth Guidance Service Appeal and Client Grievance Procedures for the States of Illinois, Massachusetts, and California.

Youth Guidance is committed to providing high-quality services to children, youth and families in schools and the community. The goal of these services is to support both academic achievement and social and life skill development. Youth Guidance trains and supports staff so that they understand the client’s needs and the role of staff in providing services. However, on occasion situations do occur when there are differences of opinion regarding services provided.

When these situations arise, you have the right to voice your concerns and to use Youth Guidance’s Service Appeal and/or Client Grievance Procedure to have those concerns addressed in a fair, reasonable and timely manner. Initiating a Service Appeal or registering a formal grievance will not affect your ability to receive services.

Service Appeal Process
Concerns should be discussed with the Youth Guidance staff member. When a client feels that their concerns have not been addressed by the YG staff member or that they are uncomfortable discussing the matter with the YG staff member, the participant should contact the YG staff member’s supervisor/manager or a YG Program Director. Participants are welcome to call Youth Guidance or to put their service concerns in writing then mail/email them to a Youth Guidance Program Director.

Youth Guidance expects that a representative from Youth Guidance will meet with the participant within ten (10) working days to address all concerns. A record of the meeting and the outcome will be recorded, and a copy will be supplied to the participant. The written record of a grievance starts with this step.

Client Grievance Procedure
What is a grievance? A grievance is any disagreement you may have with Youth Guidance about the type or quality of service you have received from Youth Guidance that cannot be successfully resolved through the appeal process described above.

To register a grievance about any aspect of Youth Guidance’s services, participants should write down the grievances and send them to the Youth Guidance Program Director responsible for the applicable Youth Guidance program (to the extent applicable) with a copy to the Chief Program Officer.

Youth Guidance expects that a Youth Guidance Director will meet with you within ten (10) working days of receipt by Youth Guidance of your written grievance.

If the meeting does not resolve the situation, you will be requested to send a written grievance to the Chief Executive Officer (“CEO”) of Youth Guidance. We will provide assistance in completing this step if you would like.

If a written grievance to the Youth Guidance CEO has not been received within thirty (30) days of your meeting with a Youth Guidance Director, a letter of closure will be sent to you by Youth Guidance.

If a written grievance from you is received by the Youth Guidance CEO within thirty (30) days of your meeting with a Youth Guidance Director, Youth Guidance will send you a letter acknowledging receipt of the grievance and confirming a review of the situation will be undertaken by the Youth Guidance CEO.

The Youth Guidance CEO’s assessment and final determination will be presented to you in writing within thirty (30) days of the date of the Youth Guidance grievance acknowledgement letter.

The Youth Guidance CEO’s decision on the grievance is final ("Decision Notice").

A record of, and the response to, submitted grievances will be kept by Youth Guidance in accordance with applicable law.
Outside Support
You may also seek assistance from an independent advocate such as:

Massachusetts Attorney General’s Consumer Hotline (617) 727-8400
https://www.mass.gov/how-to/file-a-consumer-complaint

At Youth Guidance we believe that no matter what challenges young people face, they are more likely to succeed when they have caring adults in their lives. Our highly trained staff guides youth to overcome life and academic challenges so they can succeed in school and in life. Annually, Youth Guidance reaches more than 12,000 children and youth in approximately 110 Chicago Public Schools and has recently expanded programs to Chicago’s suburbs, Boston, MA and Los Angeles, CA. Our programs include:

- Becoming A Man (BAM)®
- Working On Womanhood (WOW)

Youth Guidance is accredited by the Council on Accreditation (COA)
CONSENT FOR PHOTO/MEDIA RELEASE

Photo/Media Release: Occasionally during YG programs, we allow groups or activities to be documented via video, photo, or interviews. This is to help the general public better understand our programs. Please note that providing consent for photo/media release is optional. If at any point you wish to revoke your permission, please email clientsupport@youth-guidance.org.

By checking “Yes” in #2 on the Youth Guidance Program Registration and Consent for Service Form:

a. You consent for the participant to be photographed, videotaped, audiotaped, and/or interviewed by YG staff, related entities (such as the YG Board of Directors or partners of YG), or the news media while under the supervision of YG staff. You also give consent for YG to use photographs, likeness, or participant voice in: promotional materials, in the news media, on the Internet, or in print publications, articles, and recruiting brochures without prior notice. You understand that for confidentiality purposes, the participant would be identified by first name, grade and/or school only.

b. You agree to release and hold harmless YG, its employees, Board of Directors, contractors, and volunteers from and against any and all claims, demands, actions, complaints, suits, or other forms of liability that shall arise out of or by reason of, or be caused by the use of the participant’s photograph, likeness or voice on television, radio, or motion pictures, or in the print medium, or on the Internet or any other electronic/digital medium.

c. You understand and agree that no money or other forms of compensation, including reimbursement for any expenses incurred by you or the participant, will become due to you or the participant at any time because of participation in any of the above activities or the above-described use of photographs, likeness, or voice.

NOTE: This Photo/Media Release policy does not apply to participants who are in the care of Illinois Department of Children and Family Services for whom this consent is not permitted.

CONSENT FOR USE OF PARTICIPANT’S ARTWORK

Occasionally during YG programs, the participant may create artwork, a piece of writing, or another assignment. YG requests your consent to use this material or copies of it in connection with YG publicity or advertising. Please note that providing consent for use of this arwork is optional. If at any point you wish to revoke your permission, please email clientsupport@youth-guidance.org.

By checking “Yes” in #3 on the Youth Guidance Program Registration and Consent for Service Form:

a. You agree to permit YG to use artwork or assignments created by the participant for publication.

b. You understand and agree that no money or other forms of compensation, including reimbursement for any expenses incurred by you or the participant, will become due to you or the participant for use of their artwork or other assignments.
2021-2022 YOUTH GUIDANCE
PROGRAM REGISTRATION AND CONSENT FOR SERVICES FORM
You must FULLY complete this form to register your child for Youth Guidance programs.
Please print. ALL INFORMATION WILL BE KEPT CONFIDENTIAL
Return ONLY this form, and not the rest of the packet!

<table>
<thead>
<tr>
<th>Student Information</th>
<th>Parent/Guardian Information</th>
<th>Program Enrollment</th>
<th>Health &amp; Wellness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant’s Full Name __________________________ Date of Birth <em><strong><strong>/</strong></strong></em>/_______</td>
<td>Parent/Guardian Name __________________________ Relationship to participant __________________________</td>
<td>Please indicate which program you wish to enroll in:</td>
<td>To ensure participants are safe during programming, we need to know of any medical conditions or allergies</td>
</tr>
<tr>
<td>Address __________________________ Unit# ______ City &amp; State __________________________ Zip _______</td>
<td>Address __________________________ Unit# ______ City __________________________ Zip _______</td>
<td>☐ BAM ☐ WOW</td>
<td>Other Health Issues/Medical Needs __________________________</td>
</tr>
<tr>
<td>Participant’s Phone #: (__<em><strong>) <strong><strong><strong>-</strong></strong></strong></strong></em> Participant’s Email: __________________________</td>
<td>Home Phone (_____ ) <strong><strong><strong>-</strong></strong></strong>___ Cell Phone (_____ ) <strong><strong><strong>-</strong></strong></strong>___</td>
<td>If you know the YG Staff member’s full name for your program, please enter it here:</td>
<td>Is your child taking any medications? ☐ No ☐ Yes → Type: __________________________</td>
</tr>
<tr>
<td>School/Site (if applicable) __________________________ Student ID# (if applicable) __________________________</td>
<td>Work Phone (_____ ) <strong><strong><strong>-</strong></strong></strong>___ Parent/Guardian’s Email __________________________</td>
<td>If you know the YG Staff member’s email enter it here:</td>
<td>*Students who require personal aids during school are required to have an aid (provided by the parent) during program.</td>
</tr>
<tr>
<td>Grade Level (if applicable) __________________________ Teacher &amp; Room/Division # (if applicable) __________________________</td>
<td>Grade Level (if applicable) __________________________ Teacher &amp; Room/Division # (if applicable) __________________________</td>
<td>Please Select Your School District Below:</td>
<td>**It is the parent/guardian’s responsibility to provide information on any relevant medical condition if accommodations are needed.</td>
</tr>
<tr>
<td>Participant’s Race (please check all that apply)</td>
<td>Gender ☐ Female ☐ Male ☐ Nonbinary ☐ Other _______________ ☐ Prefer not to answer</td>
<td>☐ Boston Public Schools (MA) ☐ Cambridge Public Schools (MA) ☐ Somerville Public Schools (MA) ☐ Graduate/Out of School</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>☐ Asian ☐ Native American</td>
<td>Receive Free/Reduced Price Lunch?</td>
<td>☐ Asian ☐ Native American</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>☐ Black/African American ☐ Multi-racial</td>
<td>☐ Yes ☐ No ☐ N/A</td>
<td>☐ Black/African American ☐ Multi-racial</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>☐ Latino(a)/Hispanic ☐ Native Hawaiian/Pacific Islander</td>
<td>☐ Yes ☐ No ☐ N/A</td>
<td>☐ Latino(a)/Hispanic ☐ Native Hawaiian/Pacific Islander</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>☐ White ☐ Other __________________________</td>
<td>☐ Yes ☐ No ☐ N/A</td>
<td>☐ White ☐ Other __________________________</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>☐ Cape Verdean ☐ Prefer not to answer.</td>
<td>☐ Yes ☐ No ☐ N/A</td>
<td>☐ Cape Verdean ☐ Prefer not to answer.</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
</tbody>
</table>

**CONSENT FOR PROGRAM PARTICIPATION**
I am 18 years or older, and I consent to participate in Youth Guidance Programs. By checking “YES” here and signing this document, I am acknowledging that I have read the enclosed Program Registration and Information Packet, and that I understand and agree to Youth Guidance’s policies and practices about how Youth Guidance collects, uses, and shares personal information about participants.

**CONSENT FOR HOLISTIC STUDENT ASSESSMENT (ONLY applicable for BAM Participants)**
I give permission for my child to complete PEAR’s Holistic Student Assessment (HSA). By checking “YES” here and signing this document, I am acknowledging that I understand and agree to Youth Guidance staff administering the HSA and using its results as part of the BAM program in support of my child’s social-emotional development. I understand that results of my child’s assessment will remain confidential in accordance with Youth Guidance’s data practices. I understand that PEAR will have access to my child’s assessment in order to provide this information back to Youth Guidance, but will not use this data for any other purpose and will also keep it confidential.

**CONSENT FOR PHOTO/MEDIA RELEASE**
I give my permission to Youth Guidance, related entities, or the news media to photograph, videotape, audiotape, and/or interview me while I am under the supervision of Youth Guidance staff. By checking “YES” here and signing this document, I am acknowledging that I understand and agree to Youth Guidance’s Photo and Media Release policy as explained in the Program Registration and Information Packet. I understand that consent for photo/media release is optional; even if I decline, I can still participate in the Youth Guidance program.

**CONSENT FOR USE OF PARTICIPANT’S ARTWORK**
I give Youth Guidance permission to publish, copy, or use my artwork produced while I am participating in a Youth Guidance program. By checking “YES” here and signing this document, I am acknowledging that I understand and agree to Youth Guidance’s policies and practices for use of participants’ artwork as explained in the Program Registration and Information Packet. I understand that consent for use of my artwork is optional; even if I decline, I can still participate in the Youth Guidance program.

If at any point you wish to revoke your permission, please email CLIENTSUPPORT@YOUTH-GUIDANCE.ORG

Youth Guidance Adult Participant Program Consent Form (Boston), SY22, Version 1.1
Youth Guidance is asking for your permission to allow us to collect your academic records from the school district where you are enrolled for program evaluation purposes. Specifically, Youth Guidance will request the following data: demographic information (e.g., gender, race, birthdate), grades, attendance records, enrollment status, credits earned, GPA, grade promotion and/or graduation data, disciplinary records, and standardized test scores (e.g., NWEA MAP, SAT) for the years prior to, of, and immediately following your participation in Youth Guidance programs. Youth Guidance will also request data indicating whether or not you graduated from high school each year until we receive data confirming graduation or withdrawal from the district. This consent is valid from now until the start of the next school year.

**PLEASE NOTE:**
- It is your choice whether or not to give Youth Guidance permission to collect your academic data from the school district for program evaluation.
- Your decision about whether or not to give your permission will not impact your ability to participate in Youth Guidance programs.
- Your identifying information will not be used in any written reports. All reports will contain only aggregate data;
- YOUR PRIVACY WILL BE PROTECTED AT ALL TIMES - ALL INFORMATION COLLECTED FROM THE SCHOOL DISTRICT WILL REMAIN COMPLETELY CONFIDENTIAL.

_Check the appropriate box to indicate whether or not you give your permission for the school district to release to Youth Guidance your educational records for the years prior to, during, and immediately following their participation in Youth Guidance programs._

- YES, I give permission for my educational records to be released by the school district to Youth Guidance.
- NO, I do not give permission for my educational records to be released by the school district to Youth Guidance.
- Not Applicable, Out of School/Graduate

_Check the appropriate box to indicate whether or not you give your permission for Youth Guidance to collect data from the school district regarding your graduation status in the future with the understanding that we will request graduation information following your Senior year, and if necessary, each subsequent year, until we receive data confirming that you have graduated or withdrew from their school district._

- YES, I give permission for Youth Guidance to obtain my future graduation status.
- NO, I do not give permission for Youth Guidance to obtain my future graduation status.
- Not Applicable, Out of School/Graduate

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**SIGNATURE REQUIRED**

<table>
<thead>
<tr>
<th>Participant’s Signature</th>
<th>Participant Name (Print clearly)</th>
<th>Today’s Date</th>
</tr>
</thead>
</table>

**FOR INTERNAL USE ONLY**

<table>
<thead>
<tr>
<th>YG Staff Member Signature</th>
<th>YG Staff Member Name</th>
<th>Today’s Date</th>
</tr>
</thead>
</table>