

APPENDIX I

INTERVIEW PROTOCOL: PARTNERSHIPS

Public reporting burden for this collection of information is estimated to average 60 minutes per respondent, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information to Eileen Pederson, U.S. Department of Labor, Employment and Training Administration, Office of Policy Development and Evaluation, Room N-5641, 200 Constitution Avenue, NW, Washington, DC 20210. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this information collection is xxxx-xxxx. Expiration Date xx/xx/20xx.

IX. Partnerships

Name of site:

Site code:

Name of site visitor:

Date of site visit:

Name of respondent(s) and titles:

Instructions: This tool is to be used for interviews with program partners, e.g., education, construction, and employment partners.

Education Partner

Name and title of respondent(s):

1. What kind of agency/organization do you represent?

| | |
|--------------------------|------------------|
| <input type="checkbox"/> | GED. |
| <input type="checkbox"/> | Post-secondary. |
| <input type="checkbox"/> | Other, describe. |

2. What are the specific services you provide to YouthBuild?

3. How would you describe your partnership with the YouthBuild program? Check all that apply and describe.

| | |
|--------------------------|---|
| <input type="checkbox"/> | We share financial resources with YouthBuild. |
| <input type="checkbox"/> | We provide staffing to YouthBuild programs. |
| <input type="checkbox"/> | We share a facility with YouthBuild. |
| <input type="checkbox"/> | We share in-kind services/resource with YouthBuild. |
| <input type="checkbox"/> | We are one of YouthBuild's funders. |
| <input type="checkbox"/> | We refer participants to YouthBuild. |
| <input type="checkbox"/> | YouthBuild refers participants to us. |
| <input type="checkbox"/> | Other, describe. |

4. How long has your organization worked with the YouthBuild program?

5. How is the partnership formalized? Check all that apply and describe.

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | MOU. |
| <input type="checkbox"/> | Contractual agreements. |
| <input type="checkbox"/> | Cost-sharing agreements. |
| <input type="checkbox"/> | Fee-for service. |
| <input type="checkbox"/> | Voucher. |
| <input type="checkbox"/> | Other, specify. |
| <input type="checkbox"/> | Not formalized. |

6. If present, how are YouthBuild youth referred for services at your organization?

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Informal coordination. |
| <input type="checkbox"/> | Formal process. |
| <input type="checkbox"/> | Other, describe. |

7. How well has this partnership worked overall? How has it evolved over time?

8. Have there been any barriers to sharing client information for the purposes of referrals and ensuring necessary services?

| | |
|--------------------------|------|
| <input type="checkbox"/> | Yes. |
| <input type="checkbox"/> | No. |

9. Are there any challenges associated with this partnership?

10. Other comments:

Construction Partner

Name and title of respondent(s):

11. What kind of agency/organization do you represent?

| | |
|--------------------------|----------|
| <input type="checkbox"/> | Private. |
| <input type="checkbox"/> | Public. |

12. What are the specific services you provide to YouthBuild?

13. How would you describe your partnership with the YouthBuild program? Check all that apply and describe.

| | |
|--------------------------|--|
| <input type="checkbox"/> | We share financial resources with YouthBuild. |
| <input type="checkbox"/> | We provide staffing to YouthBuild programs. |
| <input type="checkbox"/> | We share a facility with YouthBuild. |
| <input type="checkbox"/> | We share in-kind services/resource with YouthBuild |
| <input type="checkbox"/> | We are one of YouthBuild's funders. |
| <input type="checkbox"/> | We refer participants to YouthBuild. |
| <input type="checkbox"/> | YouthBuild refers participants to us. |
| <input type="checkbox"/> | Other, describe. |

14. How long has your organization worked with the YouthBuild program?

Text

15. How is the partnership formalized? Check all that apply and describe.

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | MOU. |
| <input type="checkbox"/> | Contractual agreements. |
| <input type="checkbox"/> | Cost-sharing agreements. |
| <input type="checkbox"/> | Fee-for service. |
| <input type="checkbox"/> | Voucher. |
| <input type="checkbox"/> | Other, specify. |
| <input type="checkbox"/> | Not formalized. |

16. If present, how are YouthBuild youth referred for services at your organization?

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Informal coordination. |
| <input type="checkbox"/> | Formal process. |
| <input type="checkbox"/> | Other, describe. |

17. How well has this partnership worked overall? How has it evolved over time?

18. Are there any challenges associated with this partnership?

19. Other comments:

Employer Partner

Name and title of respondent(s):

20. Describe your company/line of work (size, history, focus of org.)

21. What are your biggest needs and challenges as an employer in hiring and retaining suitable workers?

22. Where do you typically go to find employees?

23. To what extent do you provide employment services for youth (e.g., on-the job training, subsidized work experience)? Check all that apply and describe.

| | |
|--------------------------|-----------------------------|
| <input type="checkbox"/> | On-the-job training. |
| <input type="checkbox"/> | Subsidized work experience. |
| <input type="checkbox"/> | Apprenticeships. |
| <input type="checkbox"/> | Other, specify. |

24. Have you ever hired YouthBuild graduates before?

| | |
|--------------------------|--|
| <input type="checkbox"/> | Yes. <ul style="list-style-type: none">• Why?• How many? 0 YouthBuild graduates.• For what specific positions? |
| <input type="checkbox"/> | No. <ul style="list-style-type: none">• Why not? |
| <input type="checkbox"/> | Other, describe. |

25. What specific skills are needed for employees at your company?

26. To what extent can you find the skills needed among YouthBuild participants?

27. What are the most significant challenges and effective strategies involved with employing youth employees?

28. How much information from YouthBuild is given to you about youth's background? About their participation in the YouthBuild program? Describe.

| | |
|--------------------------|---|
| <input type="checkbox"/> | I am typically given a lot of background information. |
| <input type="checkbox"/> | I am typically given some background information. |
| <input type="checkbox"/> | I am not typically given any background information. |
| <input type="checkbox"/> | Other, describe. |

29. Have you found the YouthBuild youths' skills to be sufficient to do the job?

| | |
|--------------------------|------------------|
| <input type="checkbox"/> | Yes. describe. |
| <input type="checkbox"/> | No. |
| <input type="checkbox"/> | Other, describe. |

30. What are youth's typical employment barriers?

| | |
|--------------------------|--|
| <input type="checkbox"/> | Lack of general work readiness skills (attitude, demeanor, timeliness, etc.) |
| <input type="checkbox"/> | Lack of technical skills. |
| <input type="checkbox"/> | Other, describe. |

31. What could YouthBuild do to better meet your needs for qualified employees?

32. Additional comments

Other Partner

Name and title of respondent(s): _____

33. What kind of agency/organization do you represent? Describe.

| | |
|--------------------------|---|
| <input type="checkbox"/> | Vocational skills agency. |
| <input type="checkbox"/> | Supportive services agency. |
| <input type="checkbox"/> | Workforce development system/One-Stop Center. |
| <input type="checkbox"/> | Union. |
| <input type="checkbox"/> | Community service agency. |
| <input type="checkbox"/> | Other, specify. |

34. What are the specific services you provide to YouthBuild?

35. How would you describe your partnership with the YouthBuild program? Check all that apply and describe.

| | |
|--------------------------|---|
| <input type="checkbox"/> | We share financial resources with YouthBuild. |
| <input type="checkbox"/> | We provide staffing to YouthBuild programs. |
| <input type="checkbox"/> | We share a facility with YouthBuild. |
| <input type="checkbox"/> | We share in-kind services/resource with YouthBuild. |
| <input type="checkbox"/> | We are one of YouthBuild's funders. |
| <input type="checkbox"/> | We refer participants to YouthBuild. |
| <input type="checkbox"/> | YouthBuild refers participants to us. |
| <input type="checkbox"/> | Other, describe. |

36. How long has your organization worked with the YouthBuild program?

Text

37. How is the partnership formalized? Check all that apply and describe.

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | MOU. |
| <input type="checkbox"/> | Contractual agreements. |
| <input type="checkbox"/> | Cost-sharing agreements. |
| <input type="checkbox"/> | Fee-for service. |
| <input type="checkbox"/> | Voucher. |
| <input type="checkbox"/> | Other, describe. |
| <input type="checkbox"/> | Not formalized. |

38. If present, how are YouthBuild youth referred for services at your organization?

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Informal coordination. |
| <input type="checkbox"/> | Formal process. |
| <input type="checkbox"/> | Other, describe. |

39. How well has this partnership worked overall? How has it evolved over time?

40. Are there any challenges associated with this partnership?

41. Other comments: