

APPENDIX J

INTERVIEW PROTOCOL: ALTERNATIVE YOUTH SERVICES

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.

X. Alternative Youth Services

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 alternative youth service providers. These providers should ideally be similar to YouthBuild and do not have a formal role in the program itself.

Alternative Youth Service Provider #1 - _____

Title and name of respondent:

1. How long you have been in business (years)?

2. Tell me more about your organization.

	Number of people on staff.
	Number of offices/locations.
	Number of clients served annually.
	Size of annual budget for FY 2011-2012.
	Other, describe.

3. What is your organization's experience in serving at-risk youth/youth who have dropped out?

4. What services do you offer for at-risk youth/youth who have dropped out?

<input type="checkbox"/>	Educational services.	
	<input type="checkbox"/>	GED prep.
	<input type="checkbox"/>	Post-secondary access/prep.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Employment services	
	<input type="checkbox"/>	Work readiness training.
	<input type="checkbox"/>	Life skills.

	<input type="checkbox"/>	Job search assistance/placement.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Vocational training	
	<input type="checkbox"/>	Construction.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Case Management.	
<input type="checkbox"/>	Supportive services	
	<input type="checkbox"/>	Mental health.
	<input type="checkbox"/>	Substance abuse.
	<input type="checkbox"/>	Housing.
	<input type="checkbox"/>	Legal services.
	<input type="checkbox"/>	Childcare.
	<input type="checkbox"/>	Transportation.
	<input type="checkbox"/>	Other.

5. Describe the youth population that you serve (e.g. age, racial/ethnic background, work history, etc.).

6. Does your target population overlap with YouthBuild's target population?

<input type="checkbox"/>	Yes. <ul style="list-style-type: none"> Describe the overlap.
<input type="checkbox"/>	No. <ul style="list-style-type: none"> Describe the ways in which it differs.

7. To what extent is your program involved with YouthBuild?

<input type="checkbox"/>	We refer participants to YouthBuild.
<input type="checkbox"/>	YouthBuild refers participants to us.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	We are not involved at all with YouthBuild. <ul style="list-style-type: none"> Why not.

8. What is your average cost per participant served (in educational, vocational, or other services)?

9. Other comments

Alternative Youth Service Provider #2 -

Title and name of respondent:

1. How long you have been in business (years)?

2. Tell me more about your organization.

	Number of people on staff.
	Number of offices/locations.
	Number of clients served annually.
	Size of annual budget for FY 2011-2012.
	Other, describe.

3. What is your organization's experience in serving at-risk youth/youth who have dropped out?

4. What services do you offer for at-risk youth/youth who have dropped out?

<input type="checkbox"/>	Educational services.	
	<input type="checkbox"/>	GED prep.
	<input type="checkbox"/>	Post-secondary access/prep.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Employment services	
	<input type="checkbox"/>	Work readiness training.
	<input type="checkbox"/>	Life skills.
	<input type="checkbox"/>	Job search assistance/placement.
<input type="checkbox"/>	Vocational training	
	<input type="checkbox"/>	Construction.
<input type="checkbox"/>	Case Management.	
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Supportive services	
	<input type="checkbox"/>	Mental health.
	<input type="checkbox"/>	Substance abuse.
	<input type="checkbox"/>	Housing.
	<input type="checkbox"/>	Legal services.

<input type="checkbox"/>	Childcare.
<input type="checkbox"/>	Transportation.
<input type="checkbox"/>	Other.

5. Describe the youth population that you serve (e.g. age, racial/ethnic background, work history, etc.).

6. Does your target population overlap with YouthBuild's target population?

<input type="checkbox"/>	<p>Yes.</p> <ul style="list-style-type: none"> Describe the overlap.
<input type="checkbox"/>	<p>No.</p> <ul style="list-style-type: none"> Describe the ways in which it differs.

7. To what extent is your program involved with YouthBuild?

<input type="checkbox"/>	We refer participants to YouthBuild.
<input type="checkbox"/>	YouthBuild refers participants to us.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	<p>We are not involved at all with YouthBuild.</p> <ul style="list-style-type: none"> Why not.

8. What is your average cost per participant served (in educational, vocational, or other services)?

9. Other comments

Alternative Youth Service Provider #3 -

Title and name of respondent:

1. How long you have been in business (years)?

2. Tell me more about your organization.

	Number of people on staff.
	Number of offices/locations.
	Number of clients served annually.
	Size of annual budget for FY 2011-2012.
	Other, describe.

3. What is your organization's experience in serving at-risk youth/youth who have dropped out?

4. What services do you offer for at-risk youth/youth who have dropped out?

<input type="checkbox"/>	Educational services.	
	<input type="checkbox"/>	GED prep.
	<input type="checkbox"/>	Post-secondary access/prep.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Employment services	
	<input type="checkbox"/>	Work readiness training.
	<input type="checkbox"/>	Life skills.
	<input type="checkbox"/>	Job search assistance/placement.
<input type="checkbox"/>	Vocational training	
	<input type="checkbox"/>	Construction.
<input type="checkbox"/>	Case Management.	
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Supportive services	
	<input type="checkbox"/>	Mental health.
	<input type="checkbox"/>	Substance abuse.
	<input type="checkbox"/>	Housing.
	<input type="checkbox"/>	Legal services.

<input type="checkbox"/>	Childcare.
<input type="checkbox"/>	Transportation.
<input type="checkbox"/>	Other.

5. Describe the youth population that you serve (e.g. age, racial/ethnic background, work history, etc.).

6. Does your target population overlap with YouthBuild's target population?

<input type="checkbox"/>	<p>Yes.</p> <ul style="list-style-type: none"> Describe the overlap.
<input type="checkbox"/>	<p>No.</p> <ul style="list-style-type: none"> Describe the ways in which it differs.

7. To what extent is your program involved with YouthBuild?

<input type="checkbox"/>	We refer participants to YouthBuild.
<input type="checkbox"/>	YouthBuild refers participants to us.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	<p>We are not involved at all with YouthBuild.</p> <ul style="list-style-type: none"> Why not.

8. What is your average cost per participant served (in educational, vocational, or other services)?

9. Other comments

Alternative Youth Service Provider #4 -

Title and name of respondent:

1. How long you have been in business (years)?

2. Tell me more about your organization.

	Number of people on staff.
	Number of offices/locations.
	Number of clients served annually.
	Size of annual budget for FY 2011-2012.
	Other, describe.

3. What is your organization's experience in serving at-risk youth/youth who have dropped out?

4. What services do you offer for at-risk youth/youth who have dropped out?

<input type="checkbox"/>	Educational services.
<input type="checkbox"/>	GED prep.
<input type="checkbox"/>	Post-secondary access/prep.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	Employment services
<input type="checkbox"/>	Work readiness training.
<input type="checkbox"/>	Life skills.
<input type="checkbox"/>	Job search assistance/placement.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	Vocational training
<input type="checkbox"/>	Construction.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	Case Management.
<input type="checkbox"/>	Supportive services
<input type="checkbox"/>	Mental health.
<input type="checkbox"/>	Substance abuse.
<input type="checkbox"/>	Housing.
<input type="checkbox"/>	Legal services.

<input type="checkbox"/>	Childcare.
<input type="checkbox"/>	Transportation.
<input type="checkbox"/>	Other.

5. Describe the youth population that you serve (e.g. age, racial/ethnic background, work history, etc.).

6. Does your target population overlap with YouthBuild's target population?

<input type="checkbox"/>	Yes. • Describe the overlap.
<input type="checkbox"/>	No. • Describe the ways in which it differs.

7. To what extent is your program involved with YouthBuild?

<input type="checkbox"/>	We refer participants to YouthBuild.
<input type="checkbox"/>	YouthBuild refers participants to us.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	We are not involved at all with YouthBuild. • Why not.

8. What is your average cost per participant served (in educational, vocational, or other services)?

9. Other comments

Alternative Youth Service Provider #5 -

Title and name of respondent:

1. How long you have been in business (years)?

2. Tell me more about your organization.

	Number of people on staff.
	Number of offices/locations.
	Number of clients served annually.
	Size of annual budget for FY 2011-2012.
	Other, describe.

3. What is your organization's experience in serving at-risk youth/youth who have dropped out?

4. What services do you offer for at-risk youth/youth who have dropped out?

<input type="checkbox"/>	Educational services.	
	<input type="checkbox"/>	GED prep.
	<input type="checkbox"/>	Post-secondary access/prep.
	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Employment services	
	<input type="checkbox"/>	Work readiness training.
	<input type="checkbox"/>	Life skills.
	<input type="checkbox"/>	Job search assistance/placement.
<input type="checkbox"/>	Vocational training	
	<input type="checkbox"/>	Construction.
<input type="checkbox"/>	<input type="checkbox"/>	Other.
<input type="checkbox"/>	Case Management.	
<input type="checkbox"/>	Supportive services	
	<input type="checkbox"/>	Mental health.
	<input type="checkbox"/>	Substance abuse.
	<input type="checkbox"/>	Housing.
<input type="checkbox"/>	<input type="checkbox"/>	Legal services.

<input type="checkbox"/>	Childcare.
<input type="checkbox"/>	Transportation.
<input type="checkbox"/>	Other.

5. Describe the youth population that you serve (e.g. age, racial/ethnic background, work history, etc.).

6. Does your target population overlap with YouthBuild's target population?

<input type="checkbox"/>	Yes. • Describe the overlap.
<input type="checkbox"/>	No. • Describe the ways in which it differs.

7. To what extent is your program involved with YouthBuild?

<input type="checkbox"/>	We refer participants to YouthBuild.
<input type="checkbox"/>	YouthBuild refers participants to us.
<input type="checkbox"/>	Other.
<input type="checkbox"/>	We are not involved at all with YouthBuild. • Why not.

8. What is your average cost per participant served (in educational, vocational, or other services)?

9. Other comments