

YOUTH DEVELOPMENT PROJECT (YDP) BACKGROUND INFORMATION FORM (BIF)¹

STEP 1: PLEASE FILL THE BOX COMPLETELY BEFORE STARTING ASSESSMENT

| | | | |
|---|--|--|--|
| 1. Student Full Name: _____ | | | |
| 2. Student School ID Number: _____ | | | |
| 3. Date (Enter <u>Month</u> <u>Year</u>): Fall ____ ____ Winter ____ ____ Spring ____ ____ (Sept. – Oct.) (Jan. – Feb.) (April – May) | | | |
| 4. Circle School: ACE CAN CAS SAT | | | |
| 5. Evaluator (Your name): _____ | | | |
| 6. Circle Condition: Counseling Group _____ Control Waitlist (Write the type of group) | | | |
| 7. Counseling Group Facilitator's Name _____ (If in counseling group, write facilitator's name) | | | |

STEP 2: INTERVIEWER: READ THIS SECTION TO THE STUDENT

For this part of the evaluation, we are interested in getting some information about the young people in our program. We want you to give us your most honest answers, and we can promise that your answers will be confidential. No one that you know will see your answers, so feel free to answer exactly what you think and feel.

Interviewer: Ask: *Do you have any questions?* Answer any questions the student has, continue.

STEP 3: BEGIN THE ASSESSMENT BELOW.

Please make sure to monitor the student as they are reading each question and circling a number response.

-
- 1 Today's date (mm/dd/yy) ____ / ____ / ____
 2. Date of Birth (mm/dd/yy) ____ / ____ / ____
 3. Age _____
 4. Grade _____
 5. Gender: 1. Female 2. Male (Circle)

¹ YDP Background Information Form

USE THE FOLLOWING CATEGORIES (1 TO 8) TO ANSWER QUESTIONS #6 AND #7.

- | | | |
|---------------------------------|-------------------------------------|---|
| 1. None, or some grade school. | 4. Graduated from high school. | 7. Attended graduate or professional school (such as law school or medical school). |
| 2. Graduated from grade school. | 5. Some college. | 8. I don't know. |
| 3. Some high school. | 6. Graduated from a 4-year college. | |

6. How far in school did your father go? (If you do not live with your father, how far in school did the main person who supported you go?)

Choose one number (**from 1 to 8**) from the above categories and write it here _____

7. How far in school did your mother go? (If you do not live with your mother, how far in school did the main person who supported you go?)

Choose one number (**from 1 to 8**) from the above categories and write it here _____

8. What kind of work does your father/ your mother/ **the main person who supported you**- your father, mother, stepfather, aunt, etc. do? If the person who supported you is not working now, mark the job he/she usually had when he/she worked.

Choose the one number (**from 1 to 17**) from the occupational categories that comes closest to the work they do and write it here _____

Occupational Categories

USE THE FOLLOWING CATEGORIES (1 TO 17) TO ANSWER QUESTION #8

1. Mechanic or Repairer: such as automobile mechanic, elevator installer, household appliance repairer, locksmith, office machine repairer, telephone installer, watch repairer.
2. Craft or Precision Worker: such as apprentice plumber, bricklayer, cabinet maker, carpenter, electrician, dental technician, home builder, machinist, miner, shoe repairer, tailor, upholsterer, well digger.
3. Machine Operator: laundry machine operator, motion picture projectionist, photoengraver, printing machine operator, production line worker, typesetter, welder.
4. Transportation Worker: such as bridge tender, delivery truck driver, locomotive engineer, parking lot attendant, railroad conductor, sea captain, taxi driver, tractor-trailer driver.
5. Agricultural, Forestry, or Fishing Worker: such as commercial fisher, farm manager, farm worker, farmer, fishing boat captain, forester, gardener, head groundskeeper, plant nursery worker, rancher.
6. Handler, Helper, or Laborer: such as car washer, construction laborer, factory laborer, landscape helper, mechanic's helper, packer, plumber's assistant, refuse collector.
7. Private Household Worker: such as children's nurse, cook, housekeeper, servant.
8. Personal Service Worker: such as baggage porter, barber, bartender, beauty shop manager, exterminator, housekeeper in hotel, head usher, hospital attendant, janitor, kitchen worker, restaurant cook, usher.
9. Protective Service Worker: such as chief jailer, court officer, fire captain, fire fighter, fire marshal, fire warden, police officer, prison guard, school crossing guard, security guard, sheriff.
10. Armed Forces Member: such as Air Force sergeant, Army colonel, Coast Guard captain, Marine private, Navy lieutenant.
11. Professional: such as architect, artist, athlete, city planner, college professor, computer systems analyst, dentist, entertainer, school teacher, guidance counselor, land surveyor, lawyer, minister, pharmacist, physical therapist, registered nurse, school librarian, social worker, writer.
12. Technician: such as airplane pilot, air traffic controller, dental hygienist, electronic technician, legal assistant, licensed practical nurse, scientific laboratory technician.
13. Executive or Administrator: such as accountant, apartment house owner, construction inspector, executive, government official, management consultant, restaurant owner or manager, school principal.
14. Clerical or Administrative Support Worker: such as baggage agent, bank teller, bookkeeper, computer operator, insurance adjuster, mail carrier, meter reader, office clerk, office machine operator, secretary, teacher's aid in grade school, telephone operator, typist.
15. Sales Worker: such as agency manager, cashier in store, door-to-door sales worker, importer, insurance agent, newspaper deliverer, real estate developer, salesperson in store, sales representative, stock broker, store owner or manager, wholesale distributor.
16. Homemaker (for own family or self).
17. I Don't know.

9. Please estimate your family's income:

- | | |
|------------------------|------------------------|
| 1. \$ 0 - \$11,999 | 4. \$31,000 - \$40,999 |
| 2. \$12,000 - \$20,999 | 5. \$41,000 - \$50,999 |
| 3. \$21,000 - \$30,999 | 6. over \$51,000 |

10. Choose the ethnic identifier you are more comfortable with:

1. White non-Hispanic
2. Spanish/Hispanic/Latino
3. Black, African American, or Negro
4. Asian/Pacific Islander
5. American Indian or Alaska Native (please specify your tribe): _____
6. Other (please specify): _____
7. Bi-ethnic (both parents of different ethnic background) please specify: _____

If you chose 7, answer question #11 and #12.

If you chose any other number, go to question #13.

11. How strongly do you identify with your father's ethnic (or cultural) group?

| | | | | |
|------------|----------|----------|-------|-----------|
| Not at all | A little | Somewhat | A Lot | Very Much |
| 1 | 2 | 3 | 4 | 5 |

12. How strongly do you identify with your mother's ethnic (or cultural) group?

| | | | | |
|------------|----------|----------|-------|-----------|
| Not at all | A little | Somewhat | A Lot | Very Much |
| 1 | 2 | 3 | 4 | 5 |

(For those who chose 7 in question #10, go to question #14)

13. How strongly do you identify with your ethnic group?

| | | | | |
|------------|----------|----------|-------|-----------|
| Not at all | A little | Somewhat | A Lot | Very Much |
| 1 | 2 | 3 | 4 | 5 |

14. Were you born in the United States? 1. Yes 2. No

15. Was your father born in the United States? 1. Yes 2. No

15a. If No, please specify his country of origin: _____

16. Was your mother born in the United States? 1. Yes 2. No

16a. If No, please specify her country of origin: _____

17. If applicable, specify the language spoken in your father's country of origin: _____
Otherwise, go to question #21.

18. How fluently do you speak the language of your father's country of origin?

| | | | | |
|------------|----------|----------|-------|-----------|
| Not at all | A little | Somewhat | A Lot | Very Much |
| 1 | 2 | 3 | 4 | 5 |

19. If applicable, specify the language spoken in your mother's country of origin: _____
Otherwise, go to question # 21.

20. How fluently do you speak the language of your mother's country of origin?

| | | | | |
|------------|----------|----------|-------|-----------|
| Not at all | A little | Somewhat | A Lot | Very Much |
| 1 | 2 | 3 | 4 | 5 |

21. Do you have any brothers or sisters (include half siblings and step siblings)? 1. Yes 2. No

21a. If Yes, please list by gender and age: _____

EDUCATIONAL HISTORY:

22. How long have you been attending this alternative high school? _____

23. What grades did you make on your report card last year? _____

24. What school did you attend before coming to this alternative high school? _____

25. What circumstances lead up to you leaving that school? _____

26. What kind of grades did you make in Middle School? _____

27. Have you ever been suspended from Middle School/ High School? 1. Yes 2. No

27a. If yes, for what reason? _____

28. STUDENT LOCATOR INFORMATION (This information is very important if we are to be able to keep in touch with you).

- For the **First** Locator please give us the name, address, and phone number of someone who will always be able to contact you, even in the event that you move. This person does not necessarily have to live in this area. Because we know that families often move, we ask you to name **two people who would always know how to locate you**.
- For the **Second** Locator give the name, address, and telephone number of ANOTHER RELATIVE OR A FAMILY FRIEND who does not live with you? Please choose someone who would always know how to locate you if you move.

| | | | |
|--------------------------------------|-------------|--------------------------------------|-------------|
| 1. Name of First Locator: | | 2. Name of Second Locator: | |
| | | | |
| 1. Number and Street | 1. Apt. No. | 2. Number and Street | 2. Apt. No. |
| | | | |
| 1. City and State | 1. Zip Code | 2. City and State | 2. Zip Code |
| | | | |
| 1. Phone No # 1 | | 2. Phone No # 1 | |
| 1. Phone No # 2 | | 2. Phone No # 2 | |
| 1. Relationship (Parent, Aunt, etc.) | | 2. Relationship (Parent, Aunt, etc.) | |