



YOUTH INDIVIDUAL SERVICE STRATEGY (I.S.S)

Participant Name: _____ Case Manager: _____
 Agency Name: _____ Program Year: _____

Barriers (at eligibility):

| | | |
|--------------------|------------------------|-------------------------------|
| School Drop-out | Basic Skills Deficient | English Language Learner |
| Foster Care | Disability | Juvenile/Adult Justice System |
| Pregnant/Parenting | Homeless | Additional Assistance Needed |

PRE

POST

Date Established: **EDUCATION ENROLLMENT**

Goal:

Goal Accomplished

Name of School/Program: _____

Start date: _____ End Date: _____

Not Completed/I.S.S Update (reason below):

Date Established: **BASIC SKILLS DEFICIENT/ENGLISH LANGUAGE LEARNER**

Pre-Test Scores

Reading EFL/Grade: _____ Math EFL/Grade: _____

Goal:

Goal Accomplished

Name of School/Program: _____

Start Date: _____ End Date: _____

Reading EFL/Grade: _____ Math EFL/Grade: _____

Not Completed/I.S.S Update (reason below):

Date Established: **DISABILITY**

Goal:

Goal Accomplished:

Not Completed/I.S.S Update (reason below):

| | | | |
|-------------------|--|--------------------------------------|--|
| Date Established: | | FOSTER CARE | |
| Goal: | | Goal Accomplished | Not Completed/I.S.S Update (reason below): |
| Date Established: | | JUVENILE/ADULT JUSTICE SYSTEM | |
| Goal: | | Goal Accomplished | Not Completed/I.S.S Update (reason below): |
| Date Established: | | PREGNANT/PARENTING | |
| Goal: | | Goal Accomplished | Not Completed/I.S.S Update (reason below): |
| Date Established: | | HOMELESS | |
| Goal: | | Goal Accomplished | Not Completed/I.S.S Update (reason below): |
| Date Established: | | ADDITIONAL ASSISTANCE | |
| Barrier: | | Goal Accomplished | Not Completed/I.S.S Update (reason below): |
| Goal: | | | |

Additional Services Provided:

| | | | |
|--------------------------------|--|--|--|
| Date Established: _____ | | LABOR MARKET INFORMATION | |
| Goal: | | Goal Accomplished Career Exploration Tool Used: _____ Not Completed/I.S.S Update (reason below): | |
| Career Pathway Interest: _____ | | | |

| | | | |
|-------------------------|--|---|--|
| Date Established: _____ | | WORK READINESS | |
| Goal: | | Goal Accomplished Not Completed/I.S.S Update (reason below): | |

| | | | |
|-------------------------|--|--|--|
| Date Established: _____ | | WORK EXPERIENCE (WEX) | |
| Goal: | | Goal Accomplished Hrs Completed: _____ Start Date: _____ End Date: _____ Not Completed/I.S.S Update (reason below): | |
| | | Direct Hire/Employed: _____ | |

| | | | |
|-------------------------|--|---|--|
| Date Established: _____ | | LEADERSHIP DEVELOPMENT | |
| Goal: | | Goal Accomplished Not Completed/I.S.S Update (reason below): | |

| | | | |
|-------------------------|--|---|--|
| Date Established: _____ | | FINANCIAL LITERACY | |
| Goal: | | Goal Accomplished Not Completed/I.S.S Update (reason below): | |

Date Established: **SUPPORTIVE SERVICES**

| | |
|-------|---|
| Goal: | Goal Accomplished Not Completed/I.S.S Update (reason below): |
|-------|---|

Date Established: **POST SECONDARY PREPARATION & TRANSITION**

| | |
|-------|---|
| Goal: | Goal Accomplished Not Completed/I.S.S Update (reason below): |
|-------|---|

Date Established: **ENTREPRENEURIAL SKILLS**

| | |
|-------|---|
| Goal: | Goal Accomplished Not Completed/I.S.S Update (reason below): |
|-------|---|

Date Established: **ADULT MENTORING**

| | |
|-------|---|
| Goal: | Goal Accomplished Not Completed/I.S.S Update (reason below): |
|-------|---|

Date Established: **OCCUPATIONAL SKILLS**

| | |
|-------|---|
| Goal: | Goal Accomplished Not Completed/I.S.S Update (reason below): |
|-------|---|

Date Established: **FOLLOW UP SERVICES**

Youth will be provided with 4 quarterly follow ups after exit (except if exclusionary exit)

Participant Signature: _____ **Date:** _____
Case Manager Signature: _____ **Date:** _____