

## YOUTH MENTORING PROGRAM

Our program serves youth in foster care in Michigan by matching them with an adult mentor from the community. We've seen firsthand the impact that a consistent and caring adult can have in a young person's life. Let our mentors help support your journey!

Advocate | Friend | Encourager | Teacher

### MENTEE ELIGIBILITY

- Youth 14 to 23 Years of age  
Must currently be in foster care within Wayne, Oakland, or Macomb County as a result of abuse or neglect
- Youth 18 to 23 Years of age  
Must have a closed foster care case *and* have been eligible for YIT (Youth in Transition) Funding while the case was open

### WHO CAN REFER A YOUTH FOR MENTORING?

- Health and Human Services Departments for Wayne, Oakland and Macomb County can refer a youth
- Private agencies can also refer a youth as long as the case jurisdiction is in Wayne, Oakland or Macomb County
- Youth may make a self-referral if they meet eligibility requirements

### START THE PROCESS TODAY!

- ✓ Contact our Mentoring Team with any questions
- ✓ Visit [www.childsafemichigan.org/mentoring](http://www.childsafemichigan.org/mentoring) for more information
- ✓ Complete the referral form and submit to the email below:

Email: [mentoring@childsafemichigan.org](mailto:mentoring@childsafemichigan.org)

Phone: (248) 837-2022

What Real  
Mentees are  
Saying...

"We have so much fun together!"

"She's more like family to me."

"I'm not alone. I know someone cares."

"I have learned to be more responsible and to trust adults more."

"I don't feel judged by my mentor."

"I like how we joke around with each other. Guy talk."



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### *Mentee Referral Form*



Name of Youth: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

MiSACWIS Person ID: \_\_\_\_\_ Referral Date: \_\_\_/\_\_\_/\_\_\_

MiSACWIS Case ID: \_\_\_\_\_

Youth's Address: \_\_\_\_\_  
\_\_\_\_\_

Youth's Phone: \_\_\_\_\_

Youth's Caregiver: \_\_\_\_\_ Caregiver's Phone: \_\_\_\_\_

Caregiver's Email: \_\_\_\_\_

Referring Worker Name: \_\_\_\_\_ Worker Phone: \_\_\_\_\_

County: \_\_\_\_\_ Referring Worker Agency: \_\_\_\_\_

Referring Worker Email: \_\_\_\_\_

#### Reasons for Referral:

#### Youth's Interests:

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#### Youth Eligibility Criteria (completed by County designee):

- Youth ages 14 to 23 who are currently in foster care as a result of an abuse or neglect court action in a case and have a case in Wayne, Oakland, or Macomb County
- Youth aged 18 to 23 who have a closed foster care case that was in Wayne, Oakland, or Macomb County and were eligible for YIT Funding while the case was open

Eligible: YES or NO Person Responsible for Review of Eligibility \_\_\_\_\_

Date Reviewed: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_