

Dhoop 1

## APPLICATION FOR FIRST PLACE

## PROGRAM OVERVIEW

First Place is a 2 year program for youth who have come out of the foster care system. The program is designed to take youth from being dependent on other people to being independent. Residents accepted into the program will:

- Sign a lease for their own 1 bedroom furnished apartment
- Work and/or go to school to work toward their career goals
- Develop a budget and learn to live by it
- Have the support of program staff and a First Place mentor to help reach their goals
- Pay a graduated rent scale, including putting utilities in their own name in year 2.

Upon successful completion of the program after 2 years youth will have:

- \$2400 available toward first and last month rent (\$1800 program fees) and security deposit (\$600) at your next apartment (besides your own savings)
- Furnishings you can take with you (bed, couch, table, dishes, pans)
- Rental history and utility payments to help build your rental and credit history to be eligible to rent a new apartment
- A budget that supports paying a rent payment and being self sufficient

#### **Rent and Program Fees:**

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Phase 1	REN1 <sup>2</sup>	PROGRAM FEE**
Month 1-4	\$300	\$50
Month 5-8	\$350	\$50
Month 9-12	\$450	\$50
Phase 2		
Month 13-16	\$525 + utilities	\$75
Month 17-20	\$600 + utilities	\$100
Month 21-24	\$675 + utilities	\$125

<sup>\* \$25</sup> from each month's rent is applied toward security deposit

DENIT\*

<sup>\*\*</sup> Program fees will be set aside with the intention of using them to pay for your next approved apartment, at Kids Belong's discretion.



# Please print neatly and clearly **Personal Information:** Name (First and last) M.I. Birthdate **Current Address:** Phone Number: **Email Address: Emergency Contact Name:** Phone: Relationship to you: Do you have a driver's license? Drivers license number: Do you own a car? Make: Model: Plate # **Court Supervision:** Are you involved with independent living or Young Adult IL YAVC Voluntary Foster Care? If yes, caseworker name? phone Caseworker email: What is your prior history with foster care? Caseworker name Agency



## **Criminal History:**

Do you have any criminal history?				
Felony or Misdemeanor?				
If yes, please explain:	-			
Do you have any pending court cases?	yes	no		
Probation or parole?				
PO name	Phone			
Health Information:				
Do you have health insurance?				
Policy #				
PCP				
Medications: name and dosage				
I agree to manage refills and take required medications. Medication usage may be monitored at any time by program staff				



## **Financial Information:**

- First place helps youth manage their financial stability in order to help them achieve their goals. At no time will First Place ask for account numbers or manage accounts on resident's behalf. First Place will assist youth who need help working on and following through on budgets, which requires honest discussion of spending and savings.
- No money will be collected by First Place for any services other than program fees and utilities.

Do you have a checking and/or savings account?		
Name of bank		
How much money do you have in savings as of this date?		
Do you use cash app, venmo, paypal, or any other cash cards or apps?		
Do you have any debts like credit cards, loans, judgments, etc?		
Debt amounts	Debt owners (bank, credit card, etc)	

Do you have any health issues or disabilities that affect your general self-care, apartment care, work, or schooling?



Mental Health:			
Are you currently involved with a counselor?			
Do you have a mental health diagnosis?			
Do you have a substance abuse history?			
Do you use illegal drugs?			
Do you use Marijuana?			
Do you vape or smoke?			
Education Information:			
Do you have a high school diploma or GED?	Name of school:		
Are you enrolled in college or trade school?	Name of school:		
What are your educational plans?			
Work Information:	Name and location:		
Are you currently employed?	Name and location.		
Names and locations of last 3 employers:			



What are your employment goals?	
What do you hope to get out of the First Place program?	



## References:

Please list any individuals we can contact regarding your application. References could be Employers, Case Workers (past or present), Foster Parents (past or present)

Reference #1	
Name:	Relationship:
Phone:	Email:
Reference #2	
Name:	Relationship:
Phone:	Email:
Reference #3	
Name:	Relationship:
Phone:	Email:
I certify that the above information is true and coadmission into the First Place program.	omplete, and I wish to be considered for
Signature	Date

First Place applications can be mailed to Kids Belong, 277 Shonat St, Muskegon MI 49442 Or neatly and clearly scanned and emailed to firstplace@kidsbelong.org