## CONNECTED YOUTH INITIATIVE (CYI) INFORMATION USE & DISCLOSURE AUTHORIZATION FORM

Nebraska Children and Families Foundation is engaging in an effort—the Connected Youth Initiative— to help unconnected youth in rural areas of Nebraska become contributing, independent citizens. For the purposes of this work, unconnected youth are defined as young people ages 14-24 who are currently or have been in the Nebraska foster care system, have had contact with child protective services, have had contact with the juvenile justice system (but are not on probation), or are homeless or near homeless.

By federal law, we (Nebraska Children and Families Foundation) are required to give people the opportunity to choose whether or not they want their data shared. We are also required to explain the purpose of this data sharing; details on the purpose of this data sharing are provided below. Any data you authorize to be shared will be used to evaluate the CYI and may help young people in similar situations to yours. If you sign this document, you are giving permission for data about your education, housing, employment, physical and mental health, social well-being, transportation, and financial well-being to be shared only with the agencies and people listed below. This is voluntary, so you are not required to sign this form in order to receive services. Please read the following statements below – if you have any questions, please ask before signing.

## Purpose of data sharing and other important information

- I understand the purpose of this data sharing is to assist with providing services, follow up in future months, and support evaluation of the Connected Youth Initiative.
- I understand this data will be used to measure outcomes to see how the Connected Youth Initiative is helping young people. My data will be combined with data about other young people receiving and not receiving Connected Youth Initiative services in Nebraska. My name and individual data will <u>not</u> be publicly shared. My data are only available to the agencies listed below.
- I understand that the data listed below will only be shared with the organizations affiliated with the Connected Youth Initiative and its evaluation partner in order to provide me with services and evaluate the program.
- I understand that <u>only</u> if my data shows that I am being harmed or there is potential for harm, my data may be disclosed; otherwise, my data <u>will not</u> be disclosed without my written consent.

## People with whom your data would be shared

- Central Navigator and Partner Agencies
- Contracted external evaluators for the Connected Youth Initiative. Specifically, WestEd and their subcontracted evaluators at the University of Nebraska at Omaha, and Category One Consulting.
- Nebraska Children and Families Foundation research and evaluation staff (Connected Youth Initiative Common Referral Form and Transitional Services Survey data only)

• Schmeeckle Research (Connected Youth Initiative Common Referral Form and Transitional Services Survey data only) What data do you allow to be shared? (Check those that you allow; also note that none of the data you

## allow to be shared will be publicly reported in a way that identifies you individually)

- Any information you provide on the Connected Youth Initiative Common Referral form
- □ Any information you provide on the Connected Youth Initiative Transitional Services Survey
- □ Educational records maintained by the state of Nebraska
- □ Employment records maintained by the state of Nebraska or their contracted entities
- □ Housing records maintained by the state of Nebraska or their contracted entities
- Criminal records maintained by the state of Nebraska or their contracted entities
- □ Health and human service records maintained by the state of Nebraska or their contracted entities
- Connected Youth Initiative program data, including information about what services were provided and when, as well as other program-related data
- □ Information previously collected as part of my involvement with the Connected Youth Initiative or services received as part of the Connected Youth Initiative
- $\Box$  I <u>allow</u> all of the data listed above to be shared.
- $\Box$  I <u>do not allow</u> any of the data listed above to be shared.

Name of young person (First, Middle, Last)	Date of birth

I understand that I do <u>not</u> have to allow my data to be shared in order to receive services. I also understand that in the future I can request in writing to the Associate Vice President of Research and Evaluation at Nebraska Children and Families Foundation if I no longer want my data to be shared, although this won't affect any information that has already been shared between the named above. I understand that I can see and get another copy of this form at any time, upon request. By signing this form, I agree to share my data that I have checked off in the box above.

This consent starts on the date I sign this form and this will expire after five (5) years from the date of signature.

Required - Signature of young person	Date	
Required if young person is 18 or younger - Signature of parent or legal guardian	Date	
Required if young person is 18 or younger – Person named above's relationship to young pers	on (printed)	
Required - Signature of agency representative who presents and explains this form	Date	
Required – Printed name of agency which the person named above represents		