



### My Transition Plan

This form is used to develop a transition plan for youth no later than 90 days prior to the youth's 18th birthday. Instructions are found at the end of the document.

#### 1. Identifying information

Youth's name	Transition plan meeting date
Date of birth	KK number
Court case number	Judge
Other case numbers	Expected transition date

#### 2. Education

My current educational status	
<input type="checkbox"/> attending high school, grade: _____	<input type="checkbox"/> graduated high school, date: _____
<input type="checkbox"/> attending General Educational Development (GED) class	<input type="checkbox"/> obtained GED, date: _____
<input type="checkbox"/> attending vocational classes	<input type="checkbox"/> completed vocational classes
<input type="checkbox"/> attending college	<input type="checkbox"/> obtained certificate of completion
<input type="checkbox"/> other: _____	

We discussed:

- completion of a voluntary placement agreement allowing me to remain in foster care to complete my high school education or GED.
- continuing my education or training after completing high school or after obtaining a GED.
- how to access the Oklahoma Foster Care Tuition Waiver and my eligibility.
- the application process for the Education and Training Voucher Program and my eligibility.
- the need to complete a free Application for Student Federal Aid (FASFA).
- contacting my tribe to inquire about scholarships for higher education, if applicable.
- contacting the Bureau of Indian Affairs Higher Education Department regarding scholarships, if applicable.
- other scholarships available to me.

My plan for education is: \_\_\_\_\_  
\_\_\_\_\_

My educational To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

### 3. Employment and income

My current employment and income status:

- working full-time, 35 hours or more per week
- working part-time, less than 35 hours per week
- not currently working
- accessing a trust fund
- other source(s) of income: \_\_\_\_\_

We discussed:

- available employment programs through Workforce Oklahoma including Job Corps
- available summer work programs through my tribe, if applicable
- community-based employment programs
- initiating the re-application process for Supplemental Security Income (SSI) or Social Security Administration (SSA) benefits, if applicable
- opportunities to earn funds as a youth speaker

My plan for employment or income is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My employment or income To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

#### 4. Housing

My housing plan is:

- |   |  |
|---|--|
| <input type="checkbox"/> apartment or house by myself                                       | <input type="checkbox"/> Job Corps                                 |
| <input type="checkbox"/> apartment or house with roommate(s)                                | <input type="checkbox"/> military                                  |
| <input type="checkbox"/> with biological family   | <input type="checkbox"/> transitional or supervised living program |
| <input type="checkbox"/> with foster family   | <input type="checkbox"/> adult group home                          |
| <input type="checkbox"/> Developmental Disabilities Services Division (DDSD) companion home |  |
| <input type="checkbox"/> specialized foster care  |  |
| <input type="checkbox"/> DDSD daily living skills home                                      |  |
| <input type="checkbox"/> other: _____   |  |

My alternate housing plan: \_\_\_\_\_

We discussed:

- where I will stay if I live in a dorm and the dorm closes during school breaks
- my eligibility for housing assistance through the Yes I Can aftercare network
- the application process for the Housing Authority or Section 8 Vouchers

My housing To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

## 5. Health

My health status:

- I had a physical and dental exam in the previous 12 months.
- I can schedule my medical appointments.
- I received the brochure, "Health Care Options for Independent Living Youth."

We discussed:

- locating a mental health provider in my local community and how to access mental health services if I need them
- my option to designate a health care proxy when I am 18 years old
- my eligibility for SoonerCare from 18 to 21 years of age and the application process 60 days prior to my 18th birthday

My health care plan is: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

My health care To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		

## 6. Life skills

My life skills status:

Mode of transportation:

- my vehicle
- public transportation
- walking
- rely on friend or family
- bicycle

Driver license status:

- valid driver license
- valid driver permit
- no driver license or permit

Financial management:

- I have a checking account.
- I have a savings account.

I will have money as I leave foster care:  Yes  No

We discussed:

- completing a credit check and resolving credit problems
- the need for a personal filing system
- attending life skills seminars and teen conferences

My life skills To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

## 7. Permanent connections

My permanent connections status is:

- I can identify five adults who will provide guidance for me.
- I completed a Permanency Pact.
- I have spiritual support in my local community.
- I have a connection with my tribe, if applicable.
- I participate in cultural activities and practices of my tribe, if applicable.

My permanent connections To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

## Section 8. Essential documents

I have:

- a certified copy of my birth certificate
- a photo ID
- my Social Security card
- my citizenship/naturalization papers

We discussed:

- selective service registration (males only)     voter registration  
 death certificates for deceased parent(s)     trust fund information  
 other: \_\_\_\_\_

My essential documents To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

### Section 9. Tribal youth

My tribal affiliation status is:

- I have my Certificate of Degree of Indian Blood (CDIB) card.  
 I have my tribal enrollment/citizenship card.  
 I have the necessary contact information for my tribe, such as telephone number, e-mail address, and tribal website to ensure I can learn about other activities, services, and supports available to me.  
 I have my Indian Health Services (IHS) card.  
 I have my tribal health card.  
 I received information regarding how to access any available tribal trust funds.

My tribal relationships To Do list:

	To Do	Who will help?
1.		
2.		
3.		
4.		
5.		

### 10. Additional discussion

We discussed:

- the importance of participating in the federal National Youth in Transition Database (NYTD) that tracks independent living services and outcomes
- supports and services available to me through the Yes I Can network until I reach 21 years of age
- the importance of maintaining a secure address for receiving mail
- the importance of reporting a change of address to SoonerCare, Yes I Can network, the Social Security Administration, and completing a change of address card at the U.S. Postal Office
- that as I near 18 years of age, I will receive a list of community resources that may be a continuing support for me
- my right to receive a copy of my Child Passport or other documents that contain available information regarding my education, health, and social history.

- I understand I may be asked to complete surveys at 19 and 21 years of age.
- I give my consent for other state agencies and the Department of Motor Vehicles to be contacted or for any other search tool to be used to locate me if I have not called the Yes I Can network to complete my surveys.

## 11. State and local resources and services

	Resource or service	Contact information
1.	Yes I Can network	1-800-397-2945
2.	Free number that connects you to local services	2-1-1
3.	To obtain a Social Security card or learn about benefits	<a href="http://www.ssa.gov">www.ssa.gov</a> or 1-800-877-9977
4.	To obtain an Oklahoma birth certificate	<a href="http://www.health.state.ok.us">www.health.state.ok.us</a> or 1-800-522-0203
5.	SoonerCare Helpline	1-800-987-7767
6.		
7.		
8.		
9.		

	Resource or service	Contact information
10.		

## 12. Comments

Youth's comments regarding the transition plan:

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Child Welfare (CW) worker's comments regarding safety issues related to the transition plan:

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Comments from other transition plan participants:

	Name	Relationship to Youth
1.		

Comments: \_\_\_\_\_

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	Name	Relationship to Youth
2.		

Comments: \_\_\_\_\_

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	Name	Relationship to Youth
3.		

Comments: \_\_\_\_\_

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	Name	Relationship to Youth
4.		

Comments: \_\_\_\_\_

\_\_\_\_\_

	Name	Relationship to Youth
5.		

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Youth's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CW worker's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CW supervisor's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Indian Child Welfare worker's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Plan participant's signature and relationship to youth

\_\_\_\_\_  
Date

Routing: Original to youth  
Copy to OKDHS record

## **Form 04PP018E, My Transition Plan Instructions**

This form is used to develop a final transition plan for youth in OKDHS or tribal custody no later than 90 days prior to the youth's 18th birthday. The form is designed to provide the youth with a transition plan and the resources and services to support it. The plan development:

- continues the independent living (IL) preparation initiated at the time the IL case plan was developed and considers the seven key elements of success;
- includes the youth, OKDHS workers, tribal child welfare workers, as applicable, and other youth-identified participants;
- considers the youth's unique needs;
- is as detailed as the youth elects; and
- includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and workforce supports and employment services.

The To Do lists are reviewed for progress or completion at the two monthly visits prior to the youth's 18th birthday. At the time of the final visit, the youth is provided a list of state and local community resources and supports, as well as tribal resources and supports, when applicable, to assist the youth during the transition. Additional resources are added based on the needs identified in the youth's plan.

Completed Form 04PP018E, is:

- signed by the youth, the OKDHS Child Welfare worker and supervisor, tribal representative when applicable, and other participating adults. When the youth does not sign the plan a note is entered on the signature line explaining the circumstances such as "refused to sign"; and
- submitted to the court at the next scheduled hearing.

A copy of Form 04PP018E is:

- provided to the youth;
- scanned into the KIDS File Cabinet when the youth is in OKDHS custody; and
- placed in the paper case file.

The transition plan meeting is documented in the:

- KIDS or eKIDS Contacts Screen with Independent Living Transition Plan selected as the Contact Purpose. The contact date populates on the KIDS IL Screen/IL Youth Information indicating the transition plan has been completed; or
- narrative portion of the paper case, when non-OKDHS staff do not have access to eKIDS, and includes the completion date of the transition plan.