

Connecticut Department of Children and Families
COMMUNITY HOUSING EMPLOYMENT ENRICHMENT (CHEER) CONTRACT

DCF-2252
 12/19 (Rev.)



(Enter name of the Participant): _____				
This is a binding contract between _____		(Enter name of Adolescent Specialist): _____		
and the Department of Children and Families (DCF), currently represented by _____				
This contract is binding during the dates listed below (which cannot exceed six months). Future contracts shall be created and signed by all parties during Participant's stay in the Community Housing Employment Enrichment Program. Failure to have an up-to-date contract will jeopardize Participant's right to any benefits afforded through CHEER.				
(Enter BEGINNING Date): _____		(Enter ENDING Date): _____		
This contract is binding beginning _____		Through _____		
This contract is subject to change if:				
a. any part of it becomes contradictory to future policies or procedures adopted by the Community Housing Employment Enrichment Program (CHEER); b. any part of it becomes contradictory to future rules, policies or procedures enacted by governing bodies; or c. said change is negotiated and signed by Participant and Adolescent Specialist and, if appropriate, the CHEER Community Case Manager.				
PARTICIPANTS RESPONSIBILITIES				
A. Participant will reside at the following address;				
Address (No. and Street)	Apt. #:	City:	State:	Zip:
* If this address changes, or if anyone other than Participant is residing, frequenting or sleeping in the CHEER home, Participant agrees to notify his or her Adolescent Specialist (and Case Manager if applicable) within 72 hours.				
B. Participant will attend a full time educational or vocational program regularly and continuously.				
Educational/Vocational Program:			Attendance Dates:	
C. Participant shall be eligible for a monthly subsidy payment in the amount of _____ for so long as Participant is in compliance with DCF CHEER program rules and policy and with this contract. The subsidy shall be calculated as set forth on Attachment A.				
D. Participant agrees to accumulate 40 productive hours per week that will include: employment training and work hours. Additional activities must be approved by DCF Adolescent Specialist. Participant will participate in the following activities for 40 hours per week: (please break out each activity and number of hours per activity to equal 40 hours).				
E. If available, Participant shall apply for financial aid in a timely fashion (with the assistance of the Adolescent Specialist).				
F. Participant shall remain in good standing as defined by the program.				
G. Participant shall be employed full time and/or participate in an approved employment training program regularly and continuously				
H. Participant shall submit progress reports from the employment program to the Adolescent Specialist within 72 hours of receipt.				
I. Participant has completed or is enrolled in the following life skills Program:				
J. Participant shall deposit 50% of earned income into an interest-bearing savings account during the first nine months of the CHEER Program				
Savings amount: _____		As of _____		
Participant shall continue to save and prepare for Participant's transition from care while participating in the CHEER program.				
K. Participant shall begin to assume a portion of the cost of Participant's care at month 10, utilizing earnings from employment. Participant shall receive 75% of the monthly subsidy as of month 10, 50% as of month 13 and 25% as of month 16. (If the Participant is approved for a volunteer service year, the Participant shall be exempt from the subsidy reduction.)				
Month 10 through month 12 (25% subsidy reduction)		_____	(new subsidy)	
Month 13 through month 15 (50% subsidy reduction)		_____	(new subsidy)	
Month 16 through month 18 (75% subsidy reduction)		_____	(new subsidy)	

- L. Participant will meet with the Adolescent Specialist at least once a month at Participant's residence (unless Participant attends school out of state).
- M. Participant agrees to be actively involved in the following additional activities:
 - A.
 - B.
 - C.
- N. Participant shall inform the Adolescent Specialist within 72 hours of any major changes in Participant's her situation including but not limited to quitting or losing a job, leaving a training program or moving.
- O. Participant shall agree to actively prepare for Participant's transition from care.
- P. Failure to follow the terms set forth in this contract may result in termination from the CHEER Program. Participant shall have a right to a fair hearing prior to termination.

DCF ADOLESCENT SPECIALIST'S RESPONSIBILITIES

- A. Adolescent Specialist may provide Participant with start-up living costs:
 - _____ for housewares (maximum \$150)
 - _____ for food (maximum \$100)
 - _____ for furniture (\$1500 maximum)
- B. Adolescent Specialist will initiate the subsidy payment each month.

The current subsidy amount is: _____ Per month for the first _____ months
- C. Adolescent Specialist may provide a one-time apartment deposit (*first and last month's rent*) of _____
- D. Adolescent Specialist will provide a medical card to Participant for the duration of Participant's involvement in CHEER.
- E. Adolescent Specialist will meet with Participant twice a month. One meeting will take place in Participant's place of residence.
- F. Adolescent Specialist will collaborate with Participant on housing, education, employment, and identifying permanent family and adult life-long connections.
- G. Adolescent Specialist and Participant will review the latter's budget expenditures monthly.
- H. Adolescent Specialist will monitor and document Participant's savings and subsidy reduction requirements.
- I. Adolescent Specialist will monitor Participant's employment and training attendance.
- J. Adolescent Specialist, with Participant, shall review the Transitional Living Case Plan, address issues as needed and document Participant's plan and progress towards transitioning from care each September or more frequently.
- K. This contract will be reviewed every three months (unless a more frequent review is required or requested) with Participant (and Case Manager if involved) present.
- L. This contract will be re-signed every six months as part of the Administrative Case Review process or when DCF adopts new subsidy calculations.

GENERAL PROVISIONS

- A. If there is a Case Manager for Participant's case, the Case Manager's responsibilities are set forth on Attachment B to this contract.
- B. Please add any additional requirements, conditions, information and agreements:

ADDITIONAL INFORMATION

This agreement will be reviewed on: _____ with Participant, Case Manager, and Adolescent Specialist present. Participant will remain eligible for CHEER until Participant's 23rd birthday, or at the end of the school year when Participant turns 23 years as long as Participant continues to meet DCF Policy criteria and remains in good academic standing.

Projected Discharge Date from CHEER: _____

Participant Signature:	Date:	Case Manager Signature:	Date:
Adolescent Specialist Signature:	Date:	Adolescent Social Worker Supervisor Signature:	Date:
Adolescent Program Supervisor Signature:	Date:	Attachment A (Budget) and Attachment B (Case Manager's Responsibilities) continued on next pages	

ATTACHMENT A

Participant will receive a monthly stipend based on the following budgeted allotment. *If applicable, a subsidy paid for Participant's child(ren) will be paid as a separate amount.

Rent _____

Utilities _____

Heat * _____

Food _____

Telephone _____

Transportation _____

Personal Care _____

Clothing _____

SUBTOTAL _____

(List Additional Expenses, if any):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Participants total funding need for rent and stipend **TOTAL** _____

Present amount of subsidy during this contract time period after reductions:

* if not included in the rent and when added to the rent, cannot exceed rental amount allowed for area contained in policy

ATTACHMENT B

Case Manager's Responsibilities

A. The Case Manager shall meet with the Participant weekly during this contract period to review and improve skills in the following areas of concern:

B. The Case Manager shall submit a monthly *Case Manager's Progress Report* to the Adolescent Specialist, the Central Office Adolescent Services representative and the Central Office Credentialing Unit.

Participant Signature:	Date:	Case Manager Signature:	Date:
Adolescent Specialist Signature:	Date:		