

NOMs Supplemental Information about Enrolled Youth

OSOC Site Name: _____

Youth Name: _____ SOC ID: _____

Assessment Date: _____ Follow-up: Baseline or _____ - month

Education

1. During the last 30 days of school, how many days was your child absent for any reason?

- | | | |
|-------------------------------------|--|--|
| (1) <input type="checkbox"/> 0 Days | (4) <input type="checkbox"/> 3 to 5 Days | (88) <input type="checkbox"/> Refused |
| (2) <input type="checkbox"/> 1 Day | (5) <input type="checkbox"/> 6 to 10 Days | (99) <input type="checkbox"/> Don't Know |
| (3) <input type="checkbox"/> 2 Days | (6) <input type="checkbox"/> More than 10 Days | (66) <input type="checkbox"/> Not Applicable |

2. How many days were unexcused absences?

- | | | |
|-------------------------------------|--|--|
| (1) <input type="checkbox"/> 0 Days | (4) <input type="checkbox"/> 3 to 5 Days | (88) <input type="checkbox"/> Refused |
| (2) <input type="checkbox"/> 1 Day | (5) <input type="checkbox"/> 6 to 10 Days | (99) <input type="checkbox"/> Don't Know |
| (3) <input type="checkbox"/> 2 Days | (6) <input type="checkbox"/> More than 10 Days | (66) <input type="checkbox"/> Not Applicable |

3. What is the highest level of education your child has finished, whether or not s/he received a degree?

- | | |
|---|---|
| (1) <input type="checkbox"/> Never Attended | (11) <input type="checkbox"/> 8 th Grade |
| (2) <input type="checkbox"/> Pre-School | (12) <input type="checkbox"/> 9 th Grade |
| (3) <input type="checkbox"/> Kindergarten | (13) <input type="checkbox"/> 10 th Grade |
| (4) <input type="checkbox"/> 1 st Grade | (14) <input type="checkbox"/> 11 th Grade |
| (5) <input type="checkbox"/> 2 nd Grade | (15) <input type="checkbox"/> 12 th Grade / HS Diploma / GED |
| (6) <input type="checkbox"/> 3 rd Grade | (16) <input type="checkbox"/> Voc/Tech Diploma |
| (7) <input type="checkbox"/> 4 th Grade | (17) <input type="checkbox"/> Some College / University |
| (8) <input type="checkbox"/> 5 th Grade | (88) <input type="checkbox"/> Refused |
| (9) <input type="checkbox"/> 6 th Grade | (99) <input type="checkbox"/> Don't Know |
| (10) <input type="checkbox"/> 7 th Grade | |

Criminal Justice

1. In the past 30 days, how many times has your child been arrested?

- _____ Times (88) Refused (99) Don't Know

**** When this form is complete, mail immediately to:**

John Vetter
OU E-TEAM
1639 Cross Center Drive, Suite 301
Norman, OK 73019

Or Fax to **405.325.5257**