



**OJJDP JUVENILE JUSTICE  
MENTORING PROGRAM  
EVALUATION WORKBOOK**

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## **I. JUMP EVALUATION**

## **I. JUMP EVALUATION WORKBOOK**

### **1. PURPOSE AND ORGANIZATION OF THIS WORKBOOK**

This Evaluation Workbook is designed for JUMP grant recipients. It contains surveys and other data collection forms, instructions for using them, and a schedule for collecting and submitting data; all the tools necessary to assist JUMP grant recipients in fulfilling their evaluation data collection requirements. The evaluation of the JUMP project will be accomplished through a partnership effort between the grantees, OJJDP, and OJJDP's evaluation contractor. OJJDP and its evaluation contractor will:

- Design the evaluation data collection forms and assist grantees as needed in preparing for data collection
- Provide each JUMP project with an analysis of its data
- Prepare an overall report on the implementation and impact of the JUMP projects.

Both quarterly and annual reports will be prepared by the OJJDP evaluator. They will be developed using data and information collected and forwarded to the OJJDP JUMP evaluator by grantees. The reports will be provided to grantees and will be used by OJJDP to monitor the progress of JUMP projects and where appropriate, to make specific improvements within projects.

Each grantee will be responsible for:

- Collecting the information required for the evaluation using copies of the instruments and forms provided in this workbook
- Sending the information to the OJJDP evaluator in accordance with the instructions and schedule in this workbook
- Participating with OJJDP in identifying lessons learned from the JUMP experience.

The Workbook is organized as follows. Part 1 begins with an overview of the JUMP initiative and the national evaluation including the roles of OJJDP, the evaluator, and JUMP grantees. It concludes by describing the data collection instruments, as well as the procedures and schedules for administering the instruments and submitting data to the OJJDP evaluator. Parts

2 through 5 contain the data collection instruments, detailed instructions for administering them, and directions for data reporting.

## **2. OVERVIEW OF THE JUMP INITIATIVE**

The Juvenile Mentoring Program (JUMP) was established in 1992 through an amendment to the Juvenile Justice Delinquency Prevention Act of 1974. Congress appropriated \$4,000,000 for JUMP for the 1994 fiscal year and \$4,000,000 for 1995.

In the July 28, 1994 Federal Register, OJJDP announced that local education agencies in partnership with public/private non-profit organizations could apply for grants for up to \$180,000 for a three year period. Approximately 550 applications were received and OJJDP selected 41 grantees for the first program year which began July 1, 1995.

The JUMP goals are to:

- Reduce juvenile delinquency and gang participation
- Improve academic performance
- Reduce school dropout rates.

The JUMP objectives spelled out in the Federal Guidelines state that JUMP is to:

- Provide general guidance to at-risk youth
- Promote personal and social responsibility among at-risk youth
- Increase at-risk youth participation in and enhance their ability to benefit from elementary and secondary education
- Discourage at-risk youths' use of illegal drugs and firearms, involvement in violence, and other delinquent activity
- Encourage at-risk youths' participation in service and community activity.

These goals and objectives are to be accomplished through adults acting as mentors to program participants, who are high-risk youth.

### **3. OVERVIEW OF THE EVALUATION**

Data to be collected for the JUMP evaluation are associated with specific program goals and objectives, measures, and data sources. The JUMP evaluation is designed to answer the following process and outcome questions:

#### **Process Questions**

- How many mentees and mentors were recruited during the program year?
- What screening mechanisms were used?
- What effort was made to recruit high-risk youth?
- Is there a waiting list for youth awaiting matches?
- Was training offered to mentors?
- Is there a waiting list for mentors?
- What was the number of mentors that were screened out or dropped out of the program and why?
- How many home visits did mentors make and what activities were they involved in during these visits?
- What was the percentage of time mentors spent delivering various program services?
- Was academic testing made available to mentored youth and how many were provided this service?
- What types of incentives or rewards were offered to youth that demonstrated academic and behavioral improvement during the program year?
- How were parents involved in JUMP?

#### **Outcome Questions**

- How many mentee's behavior got worse, stayed the same, or improved?
- Have mentee associations with delinquent peers increased, remained the same, or decreased?

- How many mentored youth were arrested during the program year, and in how many instances were weapons involved in the commission of acts of delinquency?
- How many youth completed the program, and how many left prematurely?

The instruments through which these and other JUMP process and outcome data are to be collected are briefly described in the next section.

#### **4. DATA COLLECTION**

This section provides an overview of the data collection instruments and the schedule for administering and returning them to the OJJDP evaluator. The first sub-section below explains how each of the data collection instruments will help answer the evaluation questions. The second sub-section describes when each of the surveys and forms are used. The third and final sub-section introduces the Data Collection Tracking Sheet that will help maintain an orderly data collection process.

##### **4.1 Forms and Surveys**

This workbook contains three types of instruments to collect evaluation data about the JUMP program:

- JUMP Participant Surveys reporting participant's impressions of program impacts on youth
- An Institutional Data Collection Instrument describing the program, its practices, clients, and the extent of implementation
- Academic and Delinquency Data Forms for reporting data from school records for each program participant.

Exhibit I-1 lists the data collection instruments in each of these three areas.

<b>EXHIBIT I-1. JUMP DATA COLLECTION INSTRUMENTS</b>		
<b>JUMP Participant Surveys</b>	<b>Institutional Data Collection Instrument</b>	<b>Academic and Delinquency Data Forms</b>
Before Match Youth Survey Before Match Parent Survey Before Match Mentor Survey Follow-up Youth Survey Follow-up Parent Survey Follow-up Mentor Survey	Institutional Data Collection Instrument	Before Match Academic and Delinquency Data Follow-Up Academic and Delinquency Data

The six survey instruments grouped under the heading "JUMP Participant Surveys" ask mentors, parents and youth to rate the youth's improvement in behaviors specified in the law that established the JUMP program (see Exhibit II-2 for a complete list of these 11 desired outcomes). Questions on the Participant surveys are designed to indicate the degree of improvement in participating youth's behaviors for each desired outcome.

The Institutional Data Collection Instrument measures the overall degree of program implementation, e.g., the numbers of mentors recruited and trained, the number of matches maintained, and participation in group activities. It also serves as an annual update for changes in the program and its practices that might have an impact on the performance of the mentoring program.

The Academic and Delinquency Data Forms provide structure for reporting school performance information for each child, such as grades, attendance, and behavior problems. Collectively, these instruments measure the desired outcomes described in the JUMP legislation and in the guidelines published in the July 28, 1994 Federal Register.

#### **4.2 Data Collection and Reporting Schedule**

The Data Collection Summary on the following page (Exhibit I-3) illustrates when each of the data collection instruments are to be administered and returned to the OJJDP evaluator. Before beginning data collection, make the appropriate number of copies of the forms you will be using and replace the originals in the workbook for later use.



**EXHIBIT I-3.**  
**DATA COLLECTION SUMMARY**

---

**At the *beginning* of each new match:**

- 1) Administer the *Before Match Participant Surveys* to:
    - a. Youth
    - b. Parent/Guardian
    - c. Mentor
  - 2) Fill out *Before Match Academic and Delinquency Data Form* for the prior year
  - 3) Enter match information and check off the above items as "complete" on the *Tracking Sheet*
  - 4) Send all completed forms listed in items 1 and 2 above to the OJJDP evaluator at the end of the academic quarter in which the match begins
  - 5) Check the "sent" box on the *Tracking Sheet* for each match.
- 

**For all continuing matches at the *end of the school year***

*or*

**When a match *terminates prematurely***

- 1) Administer the *Follow-Up Participant Surveys* to:
    - a. Youth
    - b. Parent/Guardian
    - c. Mentor
  - 2) Fill out *Follow-Up Academic and Delinquency Data Form* for the year
  - 3) Complete the appropriate sections of the *Tracking Sheet*
  - 4) Send all forms listed in items 1 and 2 above, along with a copy of the *Tracking Sheet*, to the OJJDP Evaluator at the end of the school year (or at the end of the academic quarter when a match is prematurely ended).
-

As the exhibit indicates, **when each new match begins**, administer the Before Match Participant surveys to the youth and their parent/guardian. Also for each new match, a Before Match Academic and Delinquency Data form should be completed using school records describing the participating youth's grades, attendance, and behavior for the previous four quarters. Follow this same procedure for youth who are starting a second or third match. The surveys and the data form for each new match are to be submitted to the OJJDP evaluator at the end of the academic quarter in which the match begins.

The only required data collection **during** the school year is for new matches (as described above) and for matches that end prematurely. When a match ends before the end of the school year, administer the Follow-Up Participant Surveys to the youth, parent/guardian, and mentor. Send completed surveys for prematurely terminated matches to the OJJDP evaluator at the end of the academic quarter.

**At the end of the school year**, administer the Follow-Up Participant Surveys to youth, parents, and mentors involved in active matches. Also, fill out Follow-Up Academic and Delinquency Data forms for all youth who were matched during the school year, including youth whose matches ended prematurely. Finally, complete the Institutional Data Collection Instrument for the year. Return all completed instruments to the OJJDP evaluator (along with a photocopy of the Tracking Sheet, described below) within 15 days of the end of the academic year.

In **subsequent years** follow the same procedure for all new youth who receive mentoring. For second and third-year youth who continue in the program from one school year to the next, do not administer Before Match Surveys or fill out Before Match academic data even if youth change mentors. However, do administer follow-up surveys and fill out follow-up academic data forms for continuing youth. This procedure will help measure the effect of prolonged mentoring.

#### **4.3 Evaluation Data Tracking Form**

The Evaluation Data Tracking Form is used to track the process of completing and mailing the Participant Surveys and the Academic and Delinquency Data forms to the OJJDP evaluator. To use the tracking form, first list the name of each matched youth and their mentor on the form, along with the date the match began. For each required data collection instrument, there are check mark boxes for the time when school data, youth, parent/guardian, and mentor surveys have been completed and mailed to the OJJDP evaluator. Mark the

appropriate "complete" box with a check when the particular survey or form is completed, and mark the "sent" box when that item is mailed to the OJJDP evaluator.

At the beginning of each new school year, start a new tracking sheet by entering the names of youth who are continuing in the program. For youth who leave and then re-enter the program or who are matched with mentors more than once, re-insert their name on a new row as often as necessary to reflect new matches.

Using the Tracking Form allows the grantee to track the status of the surveys and forms that must be completed and sent to the OJJDP evaluator. Periodically review the data tracking form to ensure that all JUMP participants have returned surveys and that required academic data have been recorded.

Although the Tracking Form is primarily for the use of JUMP program staff, please *forward a copy of the form to the OJJDP evaluator whenever data collection instruments are mailed in to the evaluator.* This will enable the evaluator to confirm that all forms sent by the grantee have been received.

**TRACKING EVALUATION DATA FOR MENTORING MATCHES**

Youth Name	Mentor Name	Before Match					Follow-Up				
		Match date	School data	Youth survey	Parent survey	Mentor survey	Date	School data	Youth survey	Parent survey	Mentor survey
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>
		/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	/ /	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>	complete <input type="checkbox"/> sent <input type="checkbox"/>

## **II. JUMP BEFORE MATCH PARTICIPANT SURVEYS**

## II. JUMP BEFORE MATCH PARTICIPANT SURVEYS

The JUMP Participant Survey instruments are designed to gather data from three separate respondent groups: 1) mentored youth, 2) parents/guardians, and 3) mentors. Three of the instruments are implemented before the match, the Before Match Youth Survey, the Before Match Parent Survey, and the Before Match Mentor Survey. Three of the instruments are implemented at the end of each school year (or if a match is terminated before the end of the school year): the Follow-Up Youth, the Follow-Up Parent, and the Follow-Up Mentor surveys. Descriptions of the instruments are presented in the following sections.

### 1. SURVEY DESCRIPTION

The *Descriptive Section* of each survey collects background information on each respondent (see Exhibit II-1). Data collected in this section of the survey instruments will help answer questions such as: Do older or younger mentors seem to be more effective, or do long-term mentoring matches result in better outcomes than short-term matches?

<b>EXHIBIT II-1. DATA COLLECTED IN THE DESCRIPTIVE SECTION OF THE JUMP PARTICIPANT SURVEYS</b>		
<b>YOUTH SURVEY</b>	<b>PARENT SURVEY</b>	<b>MENTOR SURVEY</b>
Program name and location Respondent's name Mentor's name Respondent's sex Respondent's race Date of birth Number of adults in the household Number of children in the household Significant adults School status School grade level Number of prior mentors Length of longest match Length of current match (follow-up) Status of current match (follow-up)	Program name and location Child's name Mentor's name Respondent's sex Respondent's race Relationship to child Number of adults in the household Number of children in the household Other adults raising the child Number of prior mentors Date of first contact with the JUMP program Length of current match (follow-up) Status of current match (follow-up)	Program name and location Respondent's name Respondent's sex Respondent's race Youth's name Youth's sex Respondent's date of birth Occupation Employment status Previous mentoring experience Number of prior matches Child raising experience Length of current match (follow-up) Status of current match (follow-up)

In the upper right corner of the instruments is a space for a Match Identification Number. This number will be used to protect the confidentiality of JUMP participants. OJJDP's evaluator will use this space to assign a unique identifying number to each match for tracking and security purposes. When the evaluator analyzes JUMP data, these numbers will

be used instead of names to protect the privacy of JUMP participants (youth, parent/guardians, and mentors). Names of participants will not be used in analysis or reports and will not be revealed by the evaluator to anyone, including OJJDP.

The *Improvement Section* of each instrument collects data on desired and perceived improvements in the 11 areas of JUMP expected outcomes (see Exhibit II-2). The names of the outcomes areas are not displayed on the youth and parent surveys to reduce potential response bias. Answers received in this section of the Before Match Surveys indicate the behavior areas in which the youth and their parents would like to see positive change. Collectively, these answers form a diagnostic tool that can be used to focus mentor orientation and training.

<b>EXHIBIT II-2. DESIRED OUTCOMES IN THE IMPROVEMENT SECTION OF THE JUMP PARTICIPANT SURVEYS</b>	
A. Improving general life skills	G. Not using violence or weapons
B. Strengthening personal responsibility	H. Reducing delinquency
C. Strengthening social responsibility	I. Reducing participation in gangs
D. Improving participation in school	J. Participating in community activities
E. Improving in school subjects	K. Experiencing new environments
F. Not using drugs	

## 2. ADMINISTERING THE BEFORE MATCH SURVEYS

When a match is made between a youth and a mentor, you should administer before-match surveys to the youth and the parent/guardian.

1. Give the parent/guardian survey to the adult primarily responsible for raising the child. This "primary guardian" should be the person who spends the most time raising the child. Only one parent/guardian survey is required. If more than one adult is available to fill out the survey, either one may complete it (or, alternatively, they can complete it together).
2. Explain the survey instruments carefully to adults and youth until they indicate that they understand how to complete each part.
3. Inform the youth that the results of the survey will be kept confidential from their parents, and do not share the results of the youth survey with their parent. Please do not allow parents/guardians to help their child complete the survey because this may bias the child's answers. If a youth requires assistance, have a staff member provide it.

4. Encourage parents/guardians to come into your facility to complete the survey. If parents/guardians cannot come into your facility, explain the instrument by telephone.

As the Before Match Surveys are completed and returned to the survey administrator, review them carefully to determine that all questions have been answered and that only the required number of answers have been provided. For example, there should be only one circled response to each question in the Improvement Section of the questionnaire. If more than one response is circled, the survey administrator should immediately question the respondent to determine which response is correct and have the respondent make the correction. This process will obviously be more effective if the survey administrator reviews the questionnaire in the presence of the respondent.

The Before Match Surveys completed by youth and their parents provide a useful assessment of their expectations for the match. When the surveys are complete, JUMP staff may choose to use them to help the mentor design useful activities for the child. The surveys can help program staff point out areas in which youth and parents need the most help and suggest methods for addressing those needs. Staff may also want to review the survey results separately with the youth and their parents/guardian to ensure that expectations are understood, and to elicit more details about particular problem areas.

The Before Match Mentor Survey is provided to assist in preparing mentors to address the JUMP expected outcome areas. Have the mentor fill out the Before Match Mentor Survey before they are paired with a youth. Use the survey as an assessment tool to determine how prepared volunteer mentors feel to discuss and deal with each of the eleven topic areas. This will help indicate areas in which the mentor might need more training or supervision. You may want to use the survey as a part of your mentor orientation process, going over the completed surveys with the volunteers to help let them know what to expect during the match. Return completed Before Match Mentor Surveys to the OJJDP evaluator .

### **3. REPORTING REQUIREMENTS**

Completed Before Match Youth, Parent/Guardian, and Mentor surveys should be sent to the OJJDP evaluator at the end of the academic quarter in which the match is initiated. You may want to retain copies for your own use (i.e., you may want to keep a file of participant improvement surveys in order to have a benchmark for tracking the progress of youth who stay in the program more than one year).



Match ID: \_\_\_\_\_

**JUMP: BEFORE MATCH YOUTH SURVEY**

**Descriptive Section**

Program Name <sub>1</sub> \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Your Last Name <sub>2</sub> \_\_\_\_\_ First \_\_\_\_\_ Today's Date <sub>3</sub> \_\_\_ mo \_\_\_ day \_\_\_ yr

Current Mentor's last name (if known) <sub>4</sub> \_\_\_\_\_ first name \_\_\_\_\_

Are you: <sub>5</sub>  male  female

What is your birth date: <sub>6</sub> \_\_\_ mo \_\_\_ day \_\_\_ yr

<sub>7</sub> What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

How many adults live in your household? <sub>8</sub> \_\_\_\_\_

How many other children? <sub>9</sub> \_\_\_\_\_

Including your parents, list the most important adults who help guide you in your life:

<sub>10</sub> \_\_\_\_\_

Are you enrolled in school? <sub>11</sub>  yes  no

What is the highest grade in which you have been enrolled? <sub>12</sub> \_\_\_\_\_

With how many other mentors have you been matched? <sub>13</sub> \_\_\_\_\_

How long was your longest previous mentor match? <sub>14</sub> \_\_\_\_\_ months

*Survey continues on next page*

**Improvement Section**

Answer the following questions about areas in your life in which you want to improve. Circle the number to the right of each question that is closest to what you think. If any of the questions do not apply to you, circle "0" for "not applicable."

How much do you want to <u>improve</u> yourself in the following areas:	I want to improve:				
	None	Little	Some	A lot	N/A
<b>A.</b>					
• Thinking about job/career opportunities	1	2	3	4	0
• Setting personal goals	1	2	3	4	0
• Attending to my personal appearance	1	2	3	4	0
• Improving my manners	1	2	3	4	0
• Feeling more confident around adults	1	2	3	4	0
• Talking about problems with family and/or friends	1	2	3	4	0
• Talking about problems with other youth instead of fighting about them	1	2	3	4	0
<b>B.</b>					
• Resolving family arguments	1	2	3	4	0
• Thinking about my mistakes	1	2	3	4	0
• Taking steps to prevent pregnancy	1	2	3	4	0
• Doing good things on my own	1	2	3	4	0
• Thinking about how my actions affect others	1	2	3	4	0
<b>C.</b>					
• Showing concern for others	1	2	3	4	0
• Voluntarily assisting others	1	2	3	4	0
<b>D.</b>					
• Working towards enrolling or staying in school	1	2	3	4	0
• Seeking help from teachers	1	2	3	4	0
• Resolving problems with teachers or other students	1	2	3	4	0
<b>E.</b>					
• Improving in a school subject	1	2	3	4	0
• Asking for tutoring/academic help when needed	1	2	3	4	0
• Using the library and reading materials	1	2	3	4	0
<b>F.</b>					
• Learning about the long-term harm of drugs	1	2	3	4	0
• Finding alternatives to using or selling drugs	1	2	3	4	0
• Not hanging out with drug users	1	2	3	4	0

Match ID: \_\_\_\_\_

How much do you want to improve yourself in the following areas:	I want to improve:				
	None	Little	Some	A lot	N/A
<b>G.</b>					
• Expressing my own anger without using violence	1	2	3	4	0
• Talking about my experiences with violence	1	2	3	4	0
• Not hanging out with people who carry weapons	1	2	3	4	0
<b>H.</b>					
• Not breaking the law	1	2	3	4	0
• Participating in safe and fun recreation	1	2	3	4	0
• Participating in recreation with role models such as a mentor or parent	1	2	3	4	0
• Not hanging out with youth who break the law	1	2	3	4	0
<b>I.</b>					
• Talking with adults about gangs	1	2	3	4	0
• Exploring and participating in alternatives to gangs	1	2	3	4	0
<b>J.</b>					
• Joining a positive club in the community	1	2	3	4	0
• Participating in activities to improve my community	1	2	3	4	0
<b>K.</b>					
• Going job hunting	1	2	3	4	0
• Visiting a workplace	1	2	3	4	0
• Going to new places that educate me	1	2	3	4	0
• Getting involved in things that broaden my mind about my and other people's way of living	1	2	3	4	0

*Thank you for taking this survey*

Match ID: \_\_\_\_\_

**JUMP: BEFORE MATCH PARENT SURVEY**

**Descriptive Section**

Program Name<sup>1</sup> \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Child's last name<sup>2</sup> \_\_\_\_\_ First \_\_\_\_\_ Today's date<sup>3</sup> \_\_\_ mo \_\_\_ day \_\_\_ yr

Current Mentor's last name<sup>4</sup> \_\_\_\_\_ first name \_\_\_\_\_

Are you  Male  Female Are you the child's  Mother  Father  Guardian  Other

7, What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

How many other adults live in the household with the child?<sup>8</sup> \_\_\_\_\_ How many other children?<sup>9</sup> \_\_\_\_\_

Do any adults, besides yourself, spend any considerable time rearing the child? <sup>10</sup>  yes  no

If so, please list them (i.e., grandparents, daycare provider): \_\_\_\_\_

How many of the other children in the household participate in this mentoring program?<sup>11</sup> \_\_\_\_\_

How many previous mentors has the child named above had? <sup>12</sup> \_\_\_\_\_

When was your first contact with the mentoring program? <sup>13</sup> \_\_\_\_\_ mo. \_\_\_\_\_ yr.

When did your child first meet the mentor named above?: <sup>14</sup> \_\_\_\_\_ mo. \_\_\_\_\_ yr.

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*Survey continues on next page*

**Improvement Section**

Answer the following questions about the areas where you think your child needs improvement. Circle the number to the right of each question that best represents your response. If any of the questions do not apply to your child circle "0" for "not applicable."

<b>My child needs to have more opportunity and better skills to improve in the following areas:</b>	<b>Needs to improve:</b>				
	<b>None</b>	<b>Little</b>	<b>Some</b>	<b>A lot</b>	<b>N/A</b>
<b>A.</b>					
• Thinking about job/career opportunities	1	2	3	4	0
• Setting personal goals	1	2	3	4	0
• Attending to personal appearance	1	2	3	4	0
• Improving his/her manners	1	2	3	4	0
• Being more confident around adults	1	2	3	4	0
• Talking about problems with family members and/or friends	1	2	3	4	0
• Talking about problems with other youth instead of fighting about them	1	2	3	4	0
<b>B.</b>					
• Resolving family conflicts	1	2	3	4	0
• Thinking about mistakes he/she has made	1	2	3	4	0
• Taking steps to prevent pregnancy	1	2	3	4	0
• Doing things on his/her own initiative	1	2	3	4	0
• Thinking about how his/her actions affect others	1	2	3	4	0
<b>C.</b>					
• Showing concern for others	1	2	3	4	0
• Voluntarily assisting others	1	2	3	4	0
<b>D.</b>					
• Working toward enrolling or staying in school	1	2	3	4	0
• Seeking help from teachers	1	2	3	4	0
• Dealing with any problems with teachers or other students	1	2	3	4	0
<b>E.</b>					
• Working to improve in a school subject	1	2	3	4	0
• Asking for tutoring/academic help when needed	1	2	3	4	0
• Increasing use of library or reference materials	1	2	3	4	0
<b>F.</b>					
• Learning about the long-term effects of drug use	1	2	3	4	0
• Exploring alternatives to using and selling drugs	1	2	3	4	0
• Not associating with drug users	1	2	3	4	0

Match ID: \_\_\_\_\_

My child needs to have more opportunity and better skills to improve in the following areas:	Needs to improve:				
	None	Little	Some	A lot	N/A
<b>G.</b>					
• Expressing his/her own anger without violence	1	2	3	4	0
• Talking about his/her experience with violence	1	2	3	4	0
• Not associating with people who carry weapons	1	2	3	4	0
<b>H.</b>					
• Not acting in ways that lead to delinquency or crime	1	2	3	4	0
• Participating in safe fun and recreation	1	2	3	4	0
• Participating in recreation with role models such as a mentor or parent	1	2	3	4	0
• Not associating with delinquent youth	1	2	3	4	0
<b>I.</b>					
• Talking with adults about gangs	1	2	3	4	0
• Exploring and participating in alternatives to gangs	1	2	3	4	0
<b>J.</b>					
• Joining a positive club in the community	1	2	3	4	0
• Participating in activities to improve his/her community	1	2	3	4	0
<b>K.</b>					
• Going job hunting	1	2	3	4	0
• Visiting a workplace	1	2	3	4	0
• Going on field trips to new positive environments	1	2	3	4	0
• Participating in positive cultural activities	1	2	3	4	0

*Thank you for taking this survey*

Match ID: \_\_\_\_\_

### JUMP: BEFORE MATCH MENTOR SURVEY

#### Descriptive Section

Program Name: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Your last name <sup>2</sup> \_\_\_\_\_ first name \_\_\_\_\_ <sup>3</sup>  male  female

What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

What is your birth date: \_\_\_\_\_ mo \_\_\_\_\_ day \_\_\_\_\_ yr      Today's date: \_\_\_\_\_ mo \_\_\_\_\_ day \_\_\_\_\_ yr

What is your occupation? <sup>7</sup> \_\_\_\_\_

Have you been employed in the last three months? <sup>8</sup>  yes  no

Have you had previous experience as a volunteer mentor? <sup>9</sup>  yes  no

Including any previous experience, how long have you been a volunteer mentor? (in months) <sup>10</sup> \_\_\_\_\_

Including any previous experience, how many prior matches have you had? <sup>11</sup> \_\_\_\_\_

Have you raised children yourself? <sup>12</sup>  yes  no

How prepared do you feel to talk about and assist youth with:	Not Prepared		Very Prepared	
1. Providing general life guidance <i>such as giving encouragement or help with coping ability</i>	1	2	3	4
2. Promoting personal responsibility <i>such as accepting the consequences of actions</i>	1	2	3	4
3. Promoting social responsibility <i>such as voluntarily helping others</i>	1	2	3	4
4. Increasing his/her participation in school <i>such as speaking to teachers or improving attendance</i>	1	2	3	4
5. Tutoring in school subjects	1	2	3	4

Match ID: \_\_\_\_\_

6. Discouraging drug use	1	2	3	4
7. Discouraging violence or carrying weapons	1	2	3	4
8. Discouraging commission of other crimes	1	2	3	4
9. Discouraging gang participation	1	2	3	4
10. Encouraging participation in community activities <i>such as joining a positive social club</i>	1	2	3	4
11. Exposing youth to new positive environments <i>such as a workplace or cultural activities</i>	1	2	3	4
<b>Please answer the following general questions</b>	<b>Not Satisfied</b>			<b>Very Satisfied</b>
12. Overall, how satisfied are you with the preparation you have received?	1	2	3	4
13. How satisfied are you with the supervision that is available to you?	1	2	3	4
14. In general, how satisfied are you with the mentoring program as a whole so far?	1	2	3	4

Use the space below for comments about any of the answers provided on this survey.


*Thank you for taking this survey*



### **III. JUMP FOLLOW-UP PARTICIPANT SURVEYS**

### **III. JUMP FOLLOW-UP PARTICIPANT SURVEYS**

These three surveys are administered to youth, parent/guardians, and mentors after a match ends or at the end of the program year, whichever comes first. They provide a means of reporting perceptions of improvement in the youth's behavior during the mentoring period. The following sections describe the surveys and how to use them.

#### **1. SURVEY DESCRIPTION**

The Follow-Up Participant Surveys contain both the descriptive and improvement sections previously described, however, they also contain a Questions and Quality Section (Q and Q) and a Mentoring Assessment Section. The Q and Q Section asks questions concerning the number of mentoring and mentor/parent meetings and the quality of the matches. Further, the section contains questions relating to the frequency and duration of meetings and about the degree of closeness and trust achieved during mentoring matches. The Follow-Up Parent/Guardian Survey asks questions about parent/guardian input into the mentoring match and the number of contact hours with the mentor.

The Mentoring Assessment Section contains questions on the level of satisfaction with the mentoring match. For example, questions are posed concerning the most positive and the worst mentoring experiences for both parents/guardians and participating youth. Answers to these questions can assist in improving JUMP from one year to the next.

#### **2. ADMINISTERING THE FOLLOW-UP SURVEYS**

The follow-up surveys are to be administered to all participants at the end of the academic year (or immediately at the end of a match when the match ends prematurely). For matches that last longer than one program/academic year, Follow-Up Match surveys should be administered to the youth, his/her parents/guardians, and mentor at the end of each academic year. Review the completed surveys carefully just as you did with the Before Match Surveys.

#### **3. REPORTING REQUIREMENTS**

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The Follow-Up Match surveys resulting from early terminations are due to the OJJDP evaluator within fifteen (15) days of the mentoring termination. Follow-Up Match surveys completed at the end of an academic year are due to the evaluator within fifteen (15) days of the end of the academic year. Again, you may want to keep copies of the surveys for your own records and use them in future program planning.

Match ID: \_\_\_\_\_

### JUMP: FOLLOW-UP YOUTH SURVEY

#### Descriptive Section

Program Name<sup>1</sup> \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Your Last Name<sup>2</sup> \_\_\_\_\_ First Name \_\_\_\_\_ Today's Date<sup>3</sup> \_\_\_ mo \_\_\_ day \_\_\_ yr

Current or most recent Mentor's last name<sup>4</sup> \_\_\_\_\_ first name \_\_\_\_\_

Are you:<sup>5</sup>  male  female

What is your birth date:<sup>6</sup> \_\_\_ mo \_\_\_ day \_\_\_ yr

<sup>7</sup>What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

How many adults live in your household?<sup>8</sup> \_\_\_ How many other children?<sup>9</sup> \_\_\_

<sup>10</sup>Including your parents, list the most important adults who help guide you in your life:

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Are you enrolled in school?<sup>11</sup>  yes  no

What is the highest grade in which you have been enrolled?<sup>12</sup> \_\_\_\_\_

How many other mentors have you had?<sup>13</sup> \_\_\_ How long was/is your longest mentor match?<sup>14</sup> \_\_\_

When did you first meet the mentor named above?<sup>15</sup> \_\_\_ mo \_\_\_ yr

When did you last meet with your mentor?<sup>16</sup> \_\_\_ mo \_\_\_ yr Are you still meeting?<sup>17</sup>  yes  no

#### Q and Q Section

1. On average, how often did you  
—meet-with-your-mentor?— \_\_\_\_\_

- 1 More than once a week
- 2 Once a week
- 3 2-3 times a month
- 4 Once a month or less

2. On average, how many hours per  
month did you spend with your  
mentor?

\_\_\_\_\_ hours

3. Who most often decided what activities you and your mentor would do together?

- 1  Me
- 2  My mentor
- 3  Both of us together
- 4  Other: \_\_\_\_\_

4. How easy or hard did you find talking with your mentor during your first few meetings?

- 1  Very easy
- 2  Sort of easy
- 3  Fairly hard
- 4  Very hard

5. Did you tell your mentor any of your closest thoughts?

- 1  A lot
- 2  Some
- 3  A few
- 4  Not any

6. How much do you feel your mentor listened to you?

- 1  A lot
- 2  Some
- 3  A little
- 4  Not at all

7. How close do you feel to your mentor?

- 1  Very close
- 2  Somewhat close
- 3  Not close at all

8. Would you have liked your relationship with your mentor to have been

- 1  Just the way it was
- 2  Closer
- 3  Less close

9. Was establishing a relationship with your mentor

- 1  Easier than you expected
- 2  The same as you expected
- 3  Harder than you expected

10. Would you say you had any problems with your mentor?

- 1  A lot
- 2  Some
- 3  A few
- 4  Not any

11. Write the problems you had with your mentor in the space. Leave it blank if you didn't have any.

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12. Describe what else you did with the mentoring program besides meeting with your mentor?

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**Improvement Section**

Answer the following questions about the experiences you had during your match with your mentor. Circle the number to the right of each question that is closest to what you think. If any of the questions do not apply to you, circle "0" for "not applicable."

Through your relationship with your mentor, how much do you feel he/she helped you improve yourself in the following areas:	Helped me improve:				
	None	Little	Some	A lot	N/A
<b>A.</b>					
• Thinking about job/career opportunities	1	2	3	4	0
• Setting personal goals	1	2	3	4	0
• Attending to my personal appearance	1	2	3	4	0
• Improving my manners	1	2	3	4	0
• Feeling more confident around adults	1	2	3	4	0
• Talking about problems with family members or friends	1	2	3	4	0
• Talking about problems with other youth instead of fighting about them	1	2	3	4	0
<b>B.</b>					
• Resolving family arguments	1	2	3	4	0
• Thinking about mistakes I made	1	2	3	4	0
• Taking steps to prevent pregnancy	1	2	3	4	0
• Doing good things on my own	1	2	3	4	0
• Thinking about how my actions affect others	1	2	3	4	0
<b>C.</b>					
• Showing concern for others	1	2	3	4	0
• Voluntarily assisting others	1	2	3	4	0
<b>D.</b>					
• Working towards enrolling or staying in school	1	2	3	4	0
• Seeking help from teachers	1	2	3	4	0
• Dealing with problems with teachers or other students	1	2	3	4	0
<b>E.</b>					
• Working to do better in a school subject	1	2	3	4	0
• Asking for tutoring/academic help when needed	1	2	3	4	0
• Using the library and reading materials	1	2	3	4	0
<b>F.</b>					
• Learning about the long-term harm of drugs	1	2	3	4	0
• Finding alternatives to using or selling drugs	1	2	3	4	0
• Not hanging out with drug users	1	2	3	4	0

Match ID: \_\_\_\_\_

Through your relationship with your mentor, how much do you feel he/she helped you improve yourself in the following areas:	Helped me improve:				
	None	Little	Some	A lot	N/A
<b>G.</b>					
• Expressing my own anger without using violence	1	2	3	4	0
• Talking about my experiences with violence	1	2	3	4	0
• Not hanging out with people who carry weapons	1	2	3	4	0
<b>H.</b>					
• Not breaking the law	1	2	3	4	0
• Participating in safe and fun recreation	1	2	3	4	0
• Participating in recreation with role models such as a mentor or parent	1	2	3	4	0
• Not hanging out with people who break the law	1	2	3	4	0
<b>I.</b>					
• Talking with adults about gangs	1	2	3	4	0
• Exploring and participating in alternatives to gangs	1	2	3	4	0
<b>J.</b>					
• Joining a positive club in the community	1	2	3	4	0
• Participating in activities to improve my community	1	2	3	4	0
<b>K.</b>					
• Going job hunting	1	2	3	4	0
• Visiting a workplace	1	2	3	4	0
• Going to new places that educate me	1	2	3	4	0
• Getting involved in things that broaden my mind about my and other people's way of living	1	2	3	4	0
<b>Overall, how much do you feel your mentor helped you improve yourself during the match?</b>	1	2	3	4	0

**Mentoring Assessment**

What was the most positive thing for you about your mentoring experience?

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What was the worst thing for you about your mentoring experience?

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Match ID: \_\_\_\_\_

### JUMP: FOLLOW-UP PARENT SURVEY

#### Descriptive Section

Program Name <sup>1</sup> \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Child's last name<sup>2</sup> \_\_\_\_\_ First \_\_\_\_\_ Today's date<sup>3</sup> \_\_\_ mo \_\_\_ day \_\_\_ yr

Current or most recent Mentor's last name<sup>4</sup> \_\_\_\_\_ first name \_\_\_\_\_

Are you <sub>5</sub>  Male  Female Are you the child's <sub>6</sub>  Mother  Father  Guardian

7, What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

How many other adults live in the household with the child? <sub>8</sub> \_\_\_\_\_ How many other children? <sub>9</sub> \_\_\_\_\_

How many of the other children in the household participate in this mentoring program? <sub>10</sub> \_\_\_\_\_

How many previous mentors has the child named above had? <sub>11</sub> \_\_\_\_\_

When was your first contact with the mentoring program? <sub>12</sub> \_\_\_\_\_ mo. \_\_\_\_\_ yr.

When did your child's match with the mentor named above begin?: <sub>13</sub> \_\_\_\_\_ mo. \_\_\_\_\_ yr.

When did they last meet? <sub>14</sub> \_\_\_\_\_ mo. \_\_\_\_\_ yr. Are they still meeting? <sub>15</sub>  yes  no

#### Q and Q Section

1. On average, how often did your child meet with the mentor?

- 1  More than once a week
- 2  Once a week
- 3  2-3 times a month
- 4  Once a month or less

2. On average, how many hours per month did your child meet with the mentor?

\_\_\_\_\_ hours

3. On average, how often did the mentor speak with you about your child?

- 1  More than once a week
- 2  Once a week
- 3  2-3 times a month
- 4  Once a month or less

4. On average, how many hours per month did the mentor meet with you?

\_\_\_\_\_ hours

Match ID: \_\_\_\_\_

5. Do you feel satisfied that the mentoring program gave you enough input in choosing your child's mentor?

- 1  Very satisfied
- 2  Satisfied
- 3  Sort of satisfied
- 4  Not satisfied

6. Do you feel satisfied that the mentoring program asked you what your child needed?

- 1  Very satisfied
- 2  Satisfied
- 3  Sort of satisfied
- 4  Not satisfied

7. Was finding a mentor for your child

- 1  Harder than you expected
- 2  The same as you expected
- 3  Easier than you expected
- 0  Cannot answer

8. Has mentoring helped your youth

- 1  Less than you expected
- 2  The same as you expected
- 3  More than you expected
- 0  Cannot answer

9. What other support did you receive from the mentoring program?

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**Improvement Section**

Answer the following questions about the experiences you and your child had during the match with the mentor. Circle the number to the right of each question that is closest to what you think. If any of the questions do not apply to your child, or you don't know circle 0 for "not applicable."

Through your child's relationship with the mentor, how much do you feel he/she improved in the following areas:	Improved:				N/A
	None	Little	Some	A lot	
A.					
• Thinking about job/career opportunities	1	2	3	4	0
• Setting personal goals	1	2	3	4	0
• Attending to personal appearance	1	2	3	4	0
• Improving his/her manners	1	2	3	4	0
• Being more confident around adults	1	2	3	4	0
• Talking about problems with family members or friends	1	2	3	4	0
• Talking about problems with other youth instead of fighting about them	1	2	3	4	0



Through your child's relationship with the mentor, how much do you feel he/she improved in the following areas:	Improved:				N/A
	None	Little	Some	A lot	
<b>B.</b>					
• Resolving family conflicts	1	2	3	4	0
• Thinking about mistakes he/she has made	1	2	3	4	0
• Taking steps to prevent pregnancy	1	2	3	4	0
• Doing things on his/her own initiative	1	2	3	4	0
• Thinking about how his/her actions affect others	1	2	3	4	0
<b>C.</b>					
• Showing concern for others	1	2	3	4	0
• Voluntarily assisting others	1	2	3	4	0
<b>D.</b>					
• Working toward enrolling or staying in school	1	2	3	4	0
• Seeking help from teachers	1	2	3	4	0
• Dealing with any problems with teachers or other students	1	2	3	4	0
<b>E.</b>					
• Working to improve in a school subject	1	2	3	4	0
• Asking for tutoring/academic help when needed	1	2	3	4	0
• Increasing use of library or reference materials	1	2	3	4	0
<b>F.</b>					
• Learning about the long-term effects of drug use	1	2	3	4	0
• Exploring alternatives to using and selling drugs	1	2	3	4	0
• Not associating with drug users	1	2	3	4	0
<b>G.</b>					
• Expressing to his/her own anger without violence	1	2	3	4	0
• Talking about his/her experience with violence	1	2	3	4	0
• Not associating with people who carry weapons	1	2	3	4	0
<b>H.</b>					
• Not acting in ways that lead to delinquency or crime	1	2	3	4	0
• Participating in safe fun and recreation	1	2	3	4	0
• Participating in recreation with role models such as a mentor or parent	1	2	3	4	0
• Not associating with delinquent youth	1	2	3	4	0

Through your child's relationship with the mentor, how much do you feel he/she improved in the following areas:	Improved:				N/A
	None	Little	Some	A lot	
I. • Talking with adults about gangs • Exploring and participating in alternatives to gangs	1	2	3	4	0
	1	2	3	4	0
J. • Joining a positive club in the community • Participating in activities to improve his/her community	1	2	3	4	0
	1	2	3	4	0
K. • Going job hunting • Visiting a workplace • Going on field trips to new positive environments • Participating in positive cultural activities	1	2	3	4	0
	1	2	3	4	0
	1	2	3	4	0
	1	2	3	4	0
Overall, how much do you feel your child improved during the match?	1	2	3	4	0

**Mentoring Assessment**

What do you feel was the most positive thing about the mentoring experience for your child?

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What do you feel was the worst thing about the mentoring experience for your child?

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What do you feel was the most positive thing about the mentoring experience for yourself?

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What do you feel was the worst thing about the mentoring experience for yourself?

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*Thank you for taking this survey*

Match ID: \_\_\_\_\_

### JUMP: FOLLOW-UP MENTOR SURVEY

#### Descriptive Section

Program Name<sup>1</sup> \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Your last name<sup>2</sup> \_\_\_\_\_ first name \_\_\_\_\_ <sup>3</sup> male  female

Your Youth's last name<sup>4</sup> \_\_\_\_\_ first name \_\_\_\_\_ <sup>5</sup> male  female

<sup>6</sup>What is your race/ethnicity?

- Hispanic (regardless of race)
- American Indian or Alaskan Native
- Asian Pacific Islander
- Black (non-Hispanic)
- White (non-Hispanic)
- Other (write in) \_\_\_\_\_

What is your birth date<sup>7</sup> \_\_\_mo \_\_\_day \_\_\_yr Today's date<sup>8</sup> \_\_\_mo \_\_\_day \_\_\_yr

What is your occupation?<sup>9</sup> \_\_\_\_\_

Have you been employed in the last three months? <sup>10</sup> yes  no

If yes, in what industry are/were you employed?<sup>11</sup> \_\_\_\_\_

How long have you been a volunteer mentor?<sup>12</sup> \_\_\_ How many prior matches have you had?<sup>13</sup> \_\_\_

When did your match with the youth named above begin?<sup>14</sup> \_\_\_mo. \_\_\_yr.

When did you last meet with this youth?<sup>15</sup> \_\_\_ mo. \_\_\_ yr Are you still meeting? <sup>16</sup> yes  no

#### Q and Q Section

1. On average, how often did you meet with your youth?

- 1  More than once a week
- 2  Once a week
- 3  2-3 times a month
- 4  Once a month or less

3. On average, how often did you talk about the youth with his/her family?

- 1  More than once a week
- 2  Once a week
- 3  2-3 times a month
- 4  Once a month or less

2. On average, how many hours per month did you spend with your youth?

\_\_\_\_\_ hours

4. On average, how many hours per month did you spend with your youth's family?

\_\_\_\_\_ hours

5. Was the majority of the time spent with the youth's
- 1  Mother
  - 2  Father
  - 3  Guardian
  - 4  Other, specify \_\_\_\_\_
6. Who most often decided what activities you and your youth would do together?
- 1  I did
  - 2  My youth
  - 3  Both of us together
  - 4  Other: \_\_\_\_\_
7. How easy or difficult did you find talking with your youth during your first few meetings?
- 1  Very easy
  - 2  Fairly easy
  - 3  Difficult
  - 4  Very difficult
8. How easy or difficult did you find talking with your youth at the end of the match period?
- 1  Very easy
  - 2  Fairly easy
  - 3  Difficult
  - 4  Very difficult
9. How easy or difficult did you find planning activities with your youth during your first few meetings?
- 
- 1  Very easy
  - 2  Fairly easy
  - 3  Difficult
  - 4  Very difficult
10. How easy or difficult did you find planning activities with your youth at the end of the match period?
- 1  Very easy
  - 2  Fairly easy
  - 3  Difficult
  - 4  Very difficult
11. How much do you feel your youth confided in you?
- 1  A lot
  - 2  Some
  - 3  A little
  - 4  Not at all
12. How close do you feel to your youth?
- 1  Very close
  - 2  Somewhat close
  - 3  Not close at all
13. Would you have liked your relationship with your youth to have been
- 1  Closer
  - 2  Less close
  - 3  Just the way it was
14. Was establishing a relationship with your youth
- 1  Harder than you expected
  - 2  Easier than you expected
  - 3  The same as you expected
15. How many hours of training did the program provide you prior to being matched with a youth?
- 1  None
  - 2  1 or 2 hours
  - 3  3 or more hours

16. How many hours of training did the program provide you after being matched with a youth?

- 1  None
- 2  1 or 2 hours
- 3  3 or more hours

17. Was the amount of training you received from the mentoring program

- 1  Very satisfactory
- 2  Somewhat satisfactory
- 3  Not satisfactory
- 4  I did not receive any training

18. What other support did you receive from the mentoring program?

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19. What percentage of your mentoring time did you spend doing the following kinds of activities? Your responses should total to 100%.

- 1 Tutoring \_\_\_\_\_ %
  - 2 Counseling \_\_\_\_\_ %
  - 3 Field trips \_\_\_\_\_ %
  - 4 Other: \_\_\_\_\_ %
- =      100 %

During the match, how easy was it for you to talk about and assist your youth with:	Very Difficult				Very Easy
• Providing general life guidance <i>such as giving encouragement or help with coping ability</i>	1	2	3	4	
• Promoting personal responsibility <i>such as accepting the consequences of actions</i>	1	2	3	4	
• Promoting social responsibility <i>such as voluntarily helping others</i>	1	2	3	4	
• Increasing his/her participation in school <i>such as speaking to teachers or improving attendance</i>	1	2	3	4	
• Tutoring in school subjects	1	2	3	4	
• Discouraging drug use	1	2	3	4	
• Discouraging violence or carrying weapons	1	2	3	4	
• Discouraging commission of other crimes	1	2	3	4	
• Discouraging gang participation	1	2	3	4	

During the match, how easy was it for you to talk about and assist your youth with:	Very Difficult				Very Easy
	1	2	3	4	
• Encouraging participation in community activities <i>such as joining a positive social club</i>	1	2	3	4	
• Exposing youth to new positive environments <i>such as a workplace or cultural activities</i>	1	2	3	4	

### Improvement Section

Answer the following questions about the experiences you had during your match with your youth. Circle the number to the right of each question that most reflects your appraisal. If any of the questions do not apply to your youth, or if you don't know, circle "0" for "not applicable."

Through your relationship with your youth, how much do you feel he/she improved in the following areas:	Improved:				
	None	Little	Some	A lot	N/A
<b>A.</b>					
• Thinking about job/career opportunities	1	2	3	4	0
• Setting personal goals	1	2	3	4	0
• Attending to personal appearance	1	2	3	4	0
• Improving his/her manners	1	2	3	4	0
• Being more confident around adults	1	2	3	4	0
• Talking about problems with family members or friends	1	2	3	4	0
• Using conflict resolution skills	1	2	3	4	0
<b>B.</b>					
• Resolving family conflicts	1	2	3	4	0
• Thinking about mistakes he/she has made	1	2	3	4	0
• Taking steps to prevent pregnancy	1	2	3	4	0
• Demonstrating initiative	1	2	3	4	0
• Thinking about how his/her actions affect others	1	2	3	4	0
<b>C.</b>					
• Showing concern for others	1	2	3	4	0
• Voluntarily assisting others	1	2	3	4	0
<b>D.</b>					
• Working toward enrolling or staying in school	1	2	3	4	0
• Seeking help from teachers	1	2	3	4	0
• Dealing with problems with teachers or other students	1	2	3	4	0

Through your relationship with your youth, how much do you feel he/she improved in the following areas:	Improved:				
	None	Little	Some	A lot	N/A
<b>E.</b>					
• Working to improve in a school subject	1	2	3	4	0
• Asking for tutoring/academic help when needed	1	2	3	4	0
• Increasing use of library and reference materials	1	2	3	4	0
<b>F.</b>					
• Learning about the long-term effects of illicit drug use	1	2	3	4	0
• Exploring alternatives to using and selling drugs	1	2	3	4	0
• Not associating with drug users	1	2	3	4	0
<b>G.</b>					
• Responding to his/her own anger without violence	1	2	3	4	0
• Talking about his/her experience with violence	1	2	3	4	0
• Not associating with people who carry weapons	1	2	3	4	0
<b>H.</b>					
• Not acting in ways that lead to delinquency or crime	1	2	3	4	0
• Participating in safe fun and recreation	1	2	3	4	0
• Participating in recreation with role models such as a mentor or parent	1	2	3	4	0
• Not associating with delinquent youth	1	2	3	4	0
<b>I.</b>					
• Talking with adults about gangs	1	2	3	4	0
• Exploring and participating in alternatives to gangs	1	2	3	4	0
<b>J.</b>					
• Joining a character-building club in the community	1	2	3	4	0
• Participating in activities to improve his/her community	1	2	3	4	0
<b>K.</b>					
• Learning job hunting skills	1	2	3	4	0
• Visiting a workplace	1	2	3	4	0
• Going on field trips to new positive environments	1	2	3	4	0
• Participating in positive cultural activities	1	2	3	4	0
<b>Overall, how much do you feel that your youth improved during the match?</b>	1	2	3	4	0

*Survey continues on next page*

**Mentoring Assessment**

**What was the most positive thing about this mentoring experience for you?**

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**What was the worst thing about this mentoring experience for you?**

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*Thank you for taking this survey*

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#### **IV. INSTITUTIONAL DATA COLLECTION INSTRUMENT**

## IV. INSTITUTIONAL DATA COLLECTION INSTRUMENT

The Institutional Data Collection Instrument (IDCI) collects both process and outcome data in five categories:

- Project Organization
- Staffing
- Program Implementation and Practices
- Comparison Academic Data
- Project Budget.

The data collected annually on the IDCI will aid in the analysis of overall program outcomes aggregated from the Participant Surveys and Academic Data forms. The IDCI will indicate the successful practices of programs with strong positive mentoring outcomes. For example, analysis of the IDCI along with outcome data might show that JUMP programs that are able to recruit high numbers of mentors have longer matches and stronger outcomes than programs that have a shortage of mentors. The following sections describe the five categories of data which are collected.

### 1. INSTRUMENT DESCRIPTION

The **Project Organization Section** collects information pertaining to any changes that may have been made to the organizational structure since the beginning of the program year. If a change has taken place, include an illustration of the change in the appendix of the IDCI. Further, you are requested to rate the effectiveness of the organizational structure.

The **Staffing Section** asks questions about the numbers of full-time and part-time professional and support staff working for both the reporting and partner JUMP organizations. It also requests information on the number of non-mentor volunteers that have worked for the JUMP during the program year.

**Program Implementation and Practices** is the largest section of the IDCI. This section asks staff to demonstrate levels of program implementation and describe program practices in the following areas:

- Number of matches
- Youth recruitment
- Youth waiting list

- Youth screening and assessment
- Youth program completion
- Mentor time commitment
- Mentor screening
- Mentor training
- Mentor supervision
- Program services
- Program activities.

This descriptive information will be analyzed in relation to program outcomes. Outcomes for programs that fit similar profiles may be aggregated for analysis.

The **Project Budget** section collects information relating to whether funds other than those provided by OJJDP were used in the operations of JUMP, and if so how much, from which sources, and for what length of time were they provided.

The final section, **Comparison Academic Data**, requests school-wide GPA and dropout averages for the participating school(s). Provide the requested academic data for all youth (not just JUMP participants) in the grade levels served by your mentoring program. These data provide a performance baseline to benchmark the academic gains of program participants.

In addition to the data and information indicated above, the instrument provides space for listing outstanding program successes and problems and for providing comments.

## **2. ADMINISTERING THE IDCI**

The IDCI is a self-administered data collection tool that requires few special directions to complete. The instrument presents a number of multiple choice answers and requires the collection of readily accessible data. Additional sheets should be attached where necessary to provide complete answers.

## **3. REPORTING REQUIREMENTS**

The IDCI is to be forwarded to the OJJDP evaluator within fifteen (15) days of the end of the program academic year.

## JUMP INSTITUTIONAL DATA COLLECTION INSTRUMENT (IDCI)

This is a self-administered data collection instrument which collects both process and outcome data. Reporting requirements are contained in the accompanying JUMP Evaluation Guidelines. Complete the IDCI at the end of each academic year. **Do not write on this original form.** Make a copy before beginning and save the original in the workbook for future use.

Name of program:					
Street:					
City:		State:		Zip:	
Contact person:			Phone number: (      )		
School year beginning:		month	year	Ending:	
				month	year
Partnering Educational Organization:					
Partnering Non-Profit Organization:					
OJP Grant Number:		Grant start date:		month	day      year

### 1. PROJECT ORGANIZATION

Did the project change the organization structure presented in the JUMP application during the school year?	1) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," when was the structure changed?	2)      month      year
3) If applicable, why was the structure changed? (Include an illustration of the new organization structure with the IDCI)	
<hr style="width: 30%; margin-left: 0;"/>	
In your opinion, how effective is the current organization structure?	4) <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor

## 2. STAFFING

	Full-time	Part-time
5. Including personnel employed by the school and the partnering non-profit organization, how many paid professional staff work for your JUMP?		
6. How many paid non-professional support positions are there in your JUMP?		
7. How many non-mentor volunteer professionals work for your JUMP?		

## 3. PROGRAM IMPLEMENTATION AND PRACTICES

<b>Number of Matches</b>	
How many new matches did the program initiate in this year?	8)
How many old matches did the program carry over from last year?	9)
How many matches ended this year?	10)
Add lines 1 and 2 and subtract line 3. Total number of matches = (Check this number to make sure it reflects the actual number of year-end matches)	11)
<b>Youth Recruitment</b>	
12) What are your eligibility requirements for youth?	
13) How are youth recruited for your program?	
<b>Youth Waiting List</b>	
Is there a waiting list for youth? (if "no" skip to question 21)	14) <input type="checkbox"/> yes <input type="checkbox"/> no
What was the approximate <i>average</i> number of youth on the waiting list during the school year?	15)

Was the waiting list ever closed this year?	16) <input type="checkbox"/> yes <input type="checkbox"/> no
Is there a limit to the time that a youth can be on the waiting list?	17) <input type="checkbox"/> yes <input type="checkbox"/> no
18) If "yes," please describe the time limit:	
Were any interested youth dropped from the waiting list this year?	19) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," approximately how many?	20)
<b>Youth Screening and Assessment</b>	
Are youth applicants assessed for risk characteristics	21) <input type="checkbox"/> yes <input type="checkbox"/> no
Are youth matched with mentors on a first-come-first-served basis?	22) <input type="checkbox"/> yes <input type="checkbox"/> no
23) If "no" describe the method:	
24) How does your JUMP define "at-risk" youth?	
Are at-risk youth actively "screened in" to the program	25) <input type="checkbox"/> yes <input type="checkbox"/> no
26) Describe special efforts to recruit at-risk youth	
Were any youth screened out of program entry?	27) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," approximately how many?	28)
29) What were the most common reasons for screening youth out? a) b) c) _____	
<b>Youth Program Completion</b>	
How many youth voluntarily dropped out of the JUMP program during the school year?	30)

31) List the most common reason for youth having dropped out	
a)	
b)	
c)	
Were any youth terminated from the JUMP program?	32) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," how many?	33)
34) List the most common reasons for terminating those youth	
a)	
b)	
c)	
<b>Mentor Time Commitment</b>	
Do you require mentors to commit to a certain length of time?	35) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," what is the length of required commitment?	36)
Does the program require that mentors meet with the youth a minimum number of times or hours each month?	37) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," what is the frequency of required meetings?	38)
<b>Mentor Screening</b>	
Does the program screen mentor volunteers	39) <input type="checkbox"/> yes <input type="checkbox"/> no
40) If "yes," check all that apply: 1 <input type="checkbox"/> criminal background check, 2 <input type="checkbox"/> submit to private investigator, 3 <input type="checkbox"/> staff interview, 4 <input type="checkbox"/> references, 5 <input type="checkbox"/> waiting period, 6 <input type="checkbox"/> employment status, 7 <input type="checkbox"/> parental status, 8 <input type="checkbox"/> sexual orientation, 9 <input type="checkbox"/> psychological profile test, 10 <input type="checkbox"/> other:	
How many new volunteer mentors did the program recruit this year?	41)
How many new volunteer mentors were rejected?	42)
43) List the most common reasons for rejecting volunteer mentors:	
a)	
b)	
c) _____	
Is there a waiting list for mentors?	44) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," what was the approximate <i>average</i> number on the waiting list this school year?	45)

46) How do you recruit new volunteers? (include copies of recruitment materials and screening forms with the IDCI)	
<b>Mentor Training</b>	
Is mentor training provided <i>prior to</i> the match?	47) <input type="checkbox"/> yes <input type="checkbox"/> no
48) If "yes," what topics are covered?	
Is mentor training provided <i>during</i> the match?	49) <input type="checkbox"/> yes <input type="checkbox"/> no
50) If "yes," what topics are covered?	
<b>Mentor Supervision</b>	
Is supervision by an experienced staff person provided to mentors?	51) <input type="checkbox"/> yes <input type="checkbox"/> no
52) If "yes," describe what topics are covered in supervision?:	
How often is supervision provided?	53) <input type="checkbox"/> routinely (i.e., the first meeting) <input type="checkbox"/> periodically (i.e., monthly) <input type="checkbox"/> as needed <input type="checkbox"/> never
Is supervision provided in person, over the phone, or both?	54) <input type="checkbox"/> in person <input type="checkbox"/> on phone <input type="checkbox"/> both <input type="checkbox"/> N/A
Who most often initiates contact with the youth to start the match, a staff member or the volunteer mentor?	55) <input type="checkbox"/> staff member <input type="checkbox"/> volunteer mentor



<b>Program Services</b>	
Are youth <i>referred</i> to other providers of needed services based on the assessments of mentors or program staff?	56) <input type="checkbox"/> yes <input type="checkbox"/> no
57) If "yes," to what other services are youth referred?	
a) _____	How many? _____
b) _____	How many? _____
c) _____	How many? _____
d) _____	How many? _____
Do other organizations contribute services to your JUMP?	58) <input type="checkbox"/> yes <input type="checkbox"/> no
59) If "yes," list them, the services they provide, and the number of JUMP youth participating	
Is academic testing available to JUMP youth?	60) <input type="checkbox"/> yes <input type="checkbox"/> no
How many youth have been provided academic testing by JUMP?	61)
Are incentives or rewards offered to youth who show academic and/or behavioral improvement during the school year?	62) <input type="checkbox"/> yes <input type="checkbox"/> no
63) If "yes," describe	
Is a management information system (MIS) utilized by JUMP?	64) <input type="checkbox"/> yes <input type="checkbox"/> no
If "yes," is it automated or manual? _____	65) <input type="checkbox"/> automated <input type="checkbox"/> manual
66) If applicable, to whom and how often are MIS reports sent? (include samples of MIS reports with the IDCI):	

<b>Program Activities</b>		
67) What activities does the program provide for youth? Check all that apply.		
1. <input type="checkbox"/> lectures 2. <input type="checkbox"/> presentations 3. <input type="checkbox"/> classes 4. <input type="checkbox"/> field trips 5. <input type="checkbox"/> overnight trips 6. <input type="checkbox"/> camping 7. <input type="checkbox"/> ropes course 8. <input type="checkbox"/> parties 9. <input type="checkbox"/> group activities 10. <input type="checkbox"/> trip to work place	11. <input type="checkbox"/> visit library 12. <input type="checkbox"/> visit museum 13. <input type="checkbox"/> fun outings 14. <input type="checkbox"/> graduation/awards events 15. <input type="checkbox"/> creative arts 16. <input type="checkbox"/> sports 17. <input type="checkbox"/> study hall 18. <input type="checkbox"/> tutoring 19. <input type="checkbox"/> group talks (raps)	20. <input type="checkbox"/> counseling 21. <input type="checkbox"/> behavior agreements or contracts 22. <input type="checkbox"/> parent support group 23. <input type="checkbox"/> academic testing 24. <input type="checkbox"/> others:
68) Describe how parents are involved in JUMP?		

#### 4. PROJECT BUDGET

Were additional funds made available to your JUMP beyond those provided by OJJDP	69) <input type="checkbox"/> yes <input type="checkbox"/> no	
If yes, list amounts, sources, and period of time covered		
Amount	Source	Period Covered
a) _____	_____	_____
b) _____	_____	_____
c)		

### 5. COMPARISON ACADEMIC DATA

Please provide the following academic averages by grade level for all students (not just JUMP participants) in your participating school(s). These data will be used to benchmark the academic outcomes of youth participating in JUMP. Provide data for the grade levels attended by JUMP youth (i.e., if your JUMP is for youth in 4th through 6th grade, report the academic averages for *all* students in the 4th, 5th, and 6th grades separately). Space is provided for two schools (and you can use copies of this form to record data for more schools), however we ask that you provide data for one school at minimum.

<b>School name:</b>		<b>Grade levels:</b>				
Starting with the lowest and ending with the highest, write one grade level in each of the column headings here →						
Number of students per grade level						
Average GPA						
Total dropouts by grade level						
Average excused absences						
Average unexcused absences						
<b>School name:</b>		<b>Grade levels:</b>				
Starting with the lowest and ending with the highest, write one grade level in each of the column headings here →						
Number of students per grade level						
Average GPA						
Average dropouts						
Average excused absences						
Average unexcused absences						

**6. OUTSTANDING PROJECT SUCCESSES AND PROBLEMS**

**Outstanding Successes**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**Outstanding Problems**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**Comments**

\_\_\_\_\_  
\_\_\_\_\_

## **V. ACADEMIC AND DELINQUENCY DATA FORMS**

## V. ACADEMIC AND DELINQUENCY DATA FORMS

The purpose of these two forms is to record academic and delinquency data before and after a match in order to measure changes in academic performance. Data collected include the academic quarter and year, the student's grade level, when the student was enrolled in school, the student's grade point average and number of excused and unexcused absences, other indicators of participation in school, and incidence of arrest or detention by law enforcement.

### 1. ADMINISTERING THE ACADEMIC AND DELINQUENCY DATA FORMS

Use school records to complete the **Before Match Academic and Delinquency Data Form** for each child who is matched with a mentor. The form requests data for the four quarters immediately preceding the mentor match. The academic quarter during which the match begins is considered the first quarter of the match *even if the match did not begin at the start of the quarter*. For example, if the mentoring match begins in the last week of the second academic quarter, then that quarter is the first mentoring quarter. The first mentoring quarter can begin in any academic quarter.

Using school records, fill in data for the four quarters immediately preceding the first mentoring quarter. Write the student's last and first names in row one. When recording the academic year and quarter in row two (2), first, write the calendar years in which the academic year begins and ends (i.e., 95/96). Then, write a number from 1 to 4 for the academic quarter. For example, for the first quarter of academic year beginning in the Fall of 1995 and ending in Spring of 1996 you would write "95/96 - 1".

For rows three (3) through fifteen (15) provide the answers requested for the four quarters preceding the first treatment quarter. Be sure to fill in the requested information for *each of the four quarters*; that is, each row should have four responses, one in each of the four empty cells. Data and information requested in rows sixteen (16) through nineteen (19) are self-explanatory.

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The instructions for the administration of the Follow-Up Academic and Delinquency Data Form are the same as above, with one major exception. On this form, all data and information requested are for the first treatment quarter and three subsequent academic quarters. If less than four academic quarters have passed since the beginning of the match, leave the subsequent columns blank and complete the form using the most current available information.

## **2. REPORTING REQUIREMENTS**

The Before Match Academic and Delinquency Data Forms are to be forwarded to the OJJDP JUMP evaluator at the end of the academic quarter in which the match begins. The Follow-up Academic and Delinquency and Data Forms are to be forwarded to the same source upon completion, either subsequent to a participant's early program termination or at the end of the program academic year. In either case, the forms should be forwarded within fifteen (15) days subsequent to termination or the end of the academic year.

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## BEFORE MATCH ACADEMIC AND DELINQUENCY DATA

1. Youth's last name:		First name:		
2. Write the <u>academic</u> year and quarter that the mentoring match began here →			/ -	qtr
Use the student's school records from the four quarters immediately previous to the match to answer the following questions.	First quarter	Second quarter	Third quarter	Fourth quarter (last quarter preceding match)
3. Indicate the academic year and quarter	/ -	/ -	/ -	/ -
4. Indicate the student's grade level (e.g. 7th, 8th, etc.)				
5. Was the youth enrolled in school at the end of the academic quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
6. If "no," write the relevant reason(s): i.e., <i>suspended, expelled, withdrew, transferred, other</i>				
7. Student's grade point average in the quarter				
8. Number of excused absences in the quarter				
9. Number of unexcused absences				
10. Was the youth suspended during the quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
11. If yes how many times was the youth suspended?				
12. How many total days was the youth suspended?				
13. Was the youth formally disciplined in the quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
14. If "yes," what actions were taken, how many times?				
15. Describe the reason for disciplinary action(s):				
16. Provide other indicators of student's level of school participation: Teacher comments (e.g., class participation, perceived interest and effort, completing assignments):				
Extracurricular activities:				
17. Was the youth arrested or detained by the police for delinquency during the four quarters?	<input type="checkbox"/> arrested <input type="checkbox"/> detained <input type="checkbox"/> neither <input type="checkbox"/> don't know			
18. If "arrested" or "detained," please describe reasons and whether weapons were involved:				



## FOLLOW-UP ACADEMIC AND DELINQUENCY DATA

1. Youth's last name:		First name:		
2. Write the <u>academic</u> year and quarter that the mentoring match began here →			/	-
			year	qtr
Beginning with the first mentoring quarter, use school records to answer the following questions about the student's performance for each quarter	First mentoring quarter	Second mentoring quarter	Third mentoring quarter	Fourth mentoring quarter
3. Indicate the academic year and quarter	/ -	/ -	/ -	/ -
4. Indicate the student's grade level (e.g., 7th, 8th, etc.)				
5. Was the youth enrolled in school at the end of the academic quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
6. If "no," write the relevant reason(s): i.e., <i>suspended, expelled, withdrew, transferred, other</i>				
7. Student's grade point average in the quarter				
8. Number of excused absences in the quarter				
9. Number of unexcused absences				
10. Was the youth suspended during the quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
11. If yes, how many times was the youth suspended?				
12. How many total days was the youth suspended?				
13. Was the youth formally disciplined in the quarter?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
14. If yes, what actions were taken, how many times?				
15. Describe the reason for disciplinary action(s):				
16. Provide other indicators of student's level of school participation: Teacher comments (e.g., class participation, perceived interest and effort, completing assignments):				
Extracurricular activities:				
17. Was the youth arrested or detained by the police for delinquency during the four quarters?			<input type="checkbox"/> arrested <input type="checkbox"/> detained <input type="checkbox"/> neither <input type="checkbox"/> don't know	
18. If "arrested" or "detained," please describe reasons and whether weapons were involved:				

