

## LONG TERM TRANSITIONAL PROGRAMMING INTAKE FORM

DATE OF GRADUATION FROM LTL (m/y): _		
INTAKE DATE FOR LONG TERM TRANSITION	NAL PRO	OGRAMMING (d/m/y):
CLIENT INFORMATION - PART I		
Name (please print):		
Date of Birth (d/m/y):		
Where are you currently living (residential addr	ess):	
Who are you currently living with:		
How many people currently live in your home:		
Do you have your own bedroom (circle): YES	NO	If no, how many others share the bedroom:
Current Mailing Address:		
Hospitalization Number:	_ Provinc	ce: Expiry Date (d/m/y):
Band Name:		
Status Number (10 digit):		
Do you have a Social Insurance Number (circle	e): YES	NO
If yes, what is your Social Insurance Number:		
What language(s) do you speak: Primary		Secondary
NOTE: Each applicant must submit a letter of	f interest	stating why they want to be considered for a
placement in LTL's Long Term Transitional P.	rogram. I	Have you attached your letter (circle): YES NO
REFERRAL INFORMATION		
Name of Referral Person:		
Relationship to you:		
Agency Name (if applicable)		

Mailing Address of Referral Person:		
Email Address of Referral Person:		
Telephone Numbers of Referral Person: Work	_ Home	Cell
NOTE: Each Referral worker must submit a letter of supportant submit sub		are referring to LTL's  YES NO
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CLIENT INFORMTION - PART II		
Education		
Are you currently in school (circle): YES NO		
If yes, what grade are you currently enrolled in:		
If no, when were you last in school:	What grade have you	completed:
What school are you/were you attending:		
Do you know how many high school credits you've earned to	date (circle):	YES NO
If yes, how many:		
Substance Use History		
Did you use substances while away from LTL (circle):	S NO	
If yes, what types of substances:		
How often:		
Do you smoke tobacco (circle): YES NO		
If yes, approximately how many cigarettes do you smoke per	day:	
Mental Health History		
Since being at LTL, have you had any suicide ideations (circl	e): YES NO	
If yes, did you undertake self-harm (type, frequency, # of tim	nes):	
If yes, when did you last self-harm:		
Were you hospitalized due to self-harm (circle): YES NO	O If yes, date:	
Have you had any mental health supports since leaving LTL	(circle): YES	NO
If yes, who did you see, when and how often:		

Since being at LTL, have you experienced any trauma {i.e. grief, loss, abuse, etc.} (circle): YES NO  If yes, what type of trauma, when and how often:						
Judicial History						
Since being at LTL, have you had any charges (circle):	YES	NO				
If yes, what were the charges and when:						
Do you have any pending court appearances (circle):	YES	NO				
If yes, what are they for, where and when:	. 20					

Applicants can apply by sending their completed Intake Form, along with their Letter of Interest and a

Letter of Support from their Referral Person to:

Leading Thunderbird Lodge
c/o Melvin Taypotat, Outreach/Intake Worker
Box 400, Fort Qu'Appelle, SK SOG 1S0
Fax: (306) 332-1850

Email: mtaypotat.ltl@sasktel.net

Telephone: (306) 332-5659 ext. 225



## EXPECTATIONS OF PARTICIPANTS OF LONG TERM TRANSITIONAL PROGRAMMING

Leading Thunderbird Lodge will soon be offering Long Term Transitional Programming for graduates of their residential treatment program. The goal of this program is to provide youth who are at least 16 years of age with a healthy, supportive living environment in which they can pursue their high school education, gain work experience, enhance life skills and strive towards a post-secondary education or skills in the area of trades training. Interested applicants must submit:

- ✓ A completed Long Term Transitional Programming Intake Form
- ✓ Provide a letter of interest along with their completed intake form.
- ✓ Provide a letter of support from their referral person

All applications will be reviewed and chosen by the Clinical, Cultural and Educational Team at LTL based on applicant interest, referral support, merit and past experience while in LTL's residential treatment program.

It is the expectation that applicants chosen to attend LTL's Long Term Transitional Program be agreeable to the following (please have them check off the boxes):

- Must be willing to pursue their high school education and attend full-time school at Bert Fox
   Composite High School in Fort Qu'Appelle
- o Must be willing to pursue work experience through community partnerships with local businesses
- Must be willing to undertake life skills programming in regards to: house chores/cleaning, laundry,
   cooking, budgeting, personal hygiene, nutrition, safe food handling, driver training, etc.
- o Must be willing to follow the rules and policies as set out for the Long Term Transitional Program
- Must be willing to not use substances and undergo random drug testing

Participants in LTL's Long Term Transitional Program must also continue developing in these areas:

- > Spirituality Be open and willing to continue their spiritual healing journey
- ➤ Emotionally Be able to self-regulate and have self-awareness
- Physically Be able to care for their personal hygiene and display healthy boundaries
- Mentally Have a high school level education and be willing to continue their learning journey