



MYT is able to provide scholarships for our programs through grants from foundations, individuals, and city, state, and federal government funds. Our grantors, in particular the City of San Francisco’s Department of Children, Youth and their Families (DCYF) set rigorous standards for grantees (like MYT) reporting the use of funds for programs, and ask for demographic information of the youth being serving. **You can help us do this by filling out this required form, whether or not you are receiving tuition assistance. THIS INFORMATION IS CONFIDENTIAL AND WILL NOT BE USED FOR PURPOSES OTHER THAN REPORTING TO DCYF. YOUTH WILL NOT BE IDENTIFIED BY NAME.**

To be filled out by MYT employee

Client ID: _____

Intake Date: ____/____/____

This section to be filled out by parent/guardian or youth (if over 18 yrs):

Gender

<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender	<input type="checkbox"/> Other
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Student’s Name _____

Birthdate: ____/____/____

Address: _____

Zip: _____ (write “unknown” for youth who are homeless, runaway or anonymous)

School: _____

Are you the Parent/Guardian? Yes _____ No _____ (Please answer if over 18 yrs.)

Race/Ethnicity (Select only one option):

African American <input type="checkbox"/>	Hispanic/Latino-Mexican/Mexican American <input type="checkbox"/>	Pacific Islander-Guamanian <input type="checkbox"/>
Other black (specify) <input type="checkbox"/>	Hispanic/Latino-Central American <input type="checkbox"/>	Pacific Islander-Hawaiian <input type="checkbox"/>
DAAsian-Chinese <input type="checkbox"/>	Hispanic/Latino -South American <input type="checkbox"/>	Pacific Islander-Tongan <input type="checkbox"/>
Asian-Filipino <input type="checkbox"/>	Hispanic/Latino-Caribbean <input type="checkbox"/>	Pacific Islander <input type="checkbox"/>
Asian-Indian <input type="checkbox"/>	Hispanic/Latino-Other (specify) <input type="checkbox"/>	Pacific Islander-Other (specify) <input type="checkbox"/>
Asian-Japanese <input type="checkbox"/>	Middle Eastern-Arab <input type="checkbox"/>	White/European American <input type="checkbox"/>
Asian-Korean <input type="checkbox"/>	Middle Eastern-Iranian <input type="checkbox"/>	Other White (specify) <input type="checkbox"/>
Asian-Laotian <input type="checkbox"/>	Middle Eastern-Other (specify) <input type="checkbox"/>	Multiracial/multiethnic <input type="checkbox"/>
Asian-Thai <input type="checkbox"/>	Native American <input type="checkbox"/>	Other <input type="checkbox"/>
Asian-Vietnamese <input type="checkbox"/>	Native Alaskan <input type="checkbox"/>	Declined to state <input type="checkbox"/>
Asian-Other (specify) <input type="checkbox"/>	Specify:	

Home Language

English <input type="checkbox"/>	Cantonese <input type="checkbox"/>
Spanish <input type="checkbox"/>	Vietnamese <input type="checkbox"/>
Mandarin <input type="checkbox"/>	Tagalog <input type="checkbox"/>
Russian <input type="checkbox"/>	Arabic <input type="checkbox"/>
Khmer/Cambodian <input type="checkbox"/>	Toishanese <input type="checkbox"/>
American Sign Language <input type="checkbox"/>	Laotian <input type="checkbox"/>
Other <input type="checkbox"/>	Somoan <input type="checkbox"/>
Specify other <input type="checkbox"/>	Unspecified <input type="checkbox"/>

English Fluency	
Fluent	<input type="checkbox"/>
Somewhat fluent	<input type="checkbox"/>
Not fluent	<input type="checkbox"/>

