



New York State Balance of State Continuum of Care

Foster Youth to Independence (FYI) Fact Sheet

Description

Foster Youth to Independence (FYI) is a program that allows Public Housing Agencies (PHAs) working with Public Child Welfare Agencies (PCWAs) to award housing vouchers to eligible youth who are homeless or at risk of homelessness. FYI recipients may receive up to 36 months of rental assistance and case management.

Participant Eligibility Requirements

- Participant is 18 years to 24 years old;

-AND-

- Participant has left **or** will leave foster care within 90 days;

-AND-

- Participant is homeless **or** at risk of becoming homeless at age 16 or older.

Foster care is defined as 24-hour substitute care for children placed away from their parents or guardians and for whom the [title IV-E agency](#) has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, [child care institutions](#), and preadoptive homes. A child is in [foster care](#) in accordance with this definition regardless of whether the foster care facility is licensed and payments are made by the [State](#), Tribal or local agency for the care of the child, whether [adoption](#) subsidy payments are being made prior to the finalization of an adoption, or whether there is Federal matching of any payments that are made.

Foster Youth to Independence (FYI): Referral Process

1. The CoC identifies a youth who is homeless or at risk of homelessness and may meet the foster care requirement of the FYI program.
2. The CoC informs the PCWA of potentially eligible youth.
3. The PCWA verifies the youth meets the foster care requirement of the FYI program and notifies the Local Administrator of the eligible youth using the FYI referral letter.
4. The Local Administrator then contacts the NYS Housing Trust Fund to finalize voucher eligibility and issues a voucher for the eligible youth. Please note that the Local Administrator may need to work with CoC and PCWA to provide documentation as part of the eligibility determination process.

Local Administrators

Cattaraugus County

Diane Salvo, Chautauqua Opportunities
132 N. Union Street, Suite 107, Olean, NY 14760
(716) 372-2550
dsalvo@chautopp.org

Clinton County

Debbie Laundry, Housing Assistance Program of Essex County (HAPEC)
103 Hand Avenue, PO Box 157, Elizabethtown, NY 12932
(518) 873-6888
debbie@clintoncountyhap.org

Fulton/Herkimer Counties

Erin Jones, JEM, Inc.
PO Box 5090, Saratoga Springs, NY 12866
(518) 372-8846
ejones@jeminc.com

Putnam County

Christine Stroud, Putnam County Housing Corporation
11 Seminary Hill Road, Carmel, NY 10512
(845) 225-8493
cstroudputsect8@aol.com

Sullivan County

Yamaris Vera, Pathstone
457 Broadway Suite 9, Monticello, NY 12701
(845) 794-4880
yvera@pathstone.org

[Insert Letter Head]

[Insert Date]

Dear [Insert Local Administrator Name],

I, [Insert Name], as a representative for the Public Child Welfare Agency (PCWA) have identified a local youth, [Insert Name] (Insert DOB) that has been deemed potentially eligible for a Foster Youth to Independence (FYI) voucher. I have verified that the potential program participant meets the following eligibility requirements:

Potential Program Participant is 18 years-24 years old.

-AND-

Potential Program Participant has left -or- will leave foster care within 90 days.

-AND-

Potential Program Participant is homeless -or- at risk of becoming homeless at age 16 or older.

Please let me know if additional information is necessary. We look forward to working together on this housing opportunity for youth in our community.

Sincerely,

[DSS Commissioner signature]

[DSS Commissioner Printed Name]

[DSS Commissioner information]

cc: CoC Contact