



Bridging Refugee Youth & Children's Services

Program Description

The fundamental purpose of BRYCS is to broaden the scope of information, resources and collaboration among service providers for refugee youth and children, as well as for refugee families and youth themselves. Please focus on programs that address those areas only. If you have any questions about whether your program meets the criteria for submission, please contact us.

If you have already filled out Organization Information, you need only fill in the name of the organization in that section before filling in the Program Description.

Organization Name (Required - Please do not abbreviate.) This information will be used to link this program description to your organization, as previously submitted.

Program Name: (Formal name, for example, "Family and Schools Together" or informal or generic "Parenting Program" - whichever is available)

Program Contact

Date Program Started

Is this program currently operating?

(drop down menu offers two choices: "Yes-Currently Operating" and "No-Not Operating")

If no, when did it end and why?

Program Staffing: (Include number, titles, use of volunteers.)

What training is required of your staff for this program?

Program Objectives/Purpose: (Include unique needs this program addresses.)

Program Description (Include how the program is structured, format, content covered, strengths, evaluation process, follow-up; for example, "8 weekly one-hour classes at the YMCA covering a different topic each week. Topics include substance abuse, gangs...Role playing and handouts are used to supplement class discussions and videos...Translators are provided...")
Please include as much detail as possible.

Program Resources: (Materials used in the program developed by your organization or others; for example, curriculum guides or videos; provide details whenever possible)

Program Groups Served: (Audience for the program; ages, ethnicity; for example, "Multi-ethnic groups of parents and their children ages 6-12 that include Sudanese, Afghans, etc.")

How do you define success with this program? (Feel free to include specific indicators)

Program Results: (How successful is/was this program? Feel free to include specific outcomes.)

Program Funding : (Optional) (Types and sources of funding; for example, matching federal dollars, in-kind dollars, ORR Community Family Strengthening and Integration funding)

What else needs to be in place for this program to operate? (For example, partnerships, collaborations, relationships, etc.)

Any additional information you want to include about the program: (For example, "mini-successes," or lessons learned)

Program Submitted By (Required) : (Please include your name and an email or telephone number where you can be reached if we have questions)

If you wish to submit Program Descriptions for more than one program, clicking the Submit Form button below will take you to a page that will allow you to return to this one. If you have already filled out Organization Information, you need only fill in the name of the organization in that section before filling in the Program Description.

After you are finished submitting your program descriptions, we would appreciate your taking the time to fill out a brief questionnaire about these forms. A link is provided on the next page.

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