

**MDHS/DYS Oakley Youth Development Center
Religious and Spiritual Assessment Form – XIII.1.F**

Youth's Name: _____ **Date:** _____

County of Origin: _____

Please answer the following questions as best you can. Remember you do not have to answer any of the questions. You will not be judged or mistreated based on the answers you give.

- A. What is your religious/spiritual background?
- B. Are you part of a religious or spiritual community?
- C. Is there a member of that community that you look to for guidance?
- D. Would you like for that person to visit and encourage you during your stay at OYDC? *(Please give their contact information)*
- E. Are your parents or legal guardian available to attend religious services here at OYDC with you?
- F. Do you have any special religious or spiritual need that we should know about?
- G. Do you consider yourself part of an organized religion?
- H. Do you have personal spiritual beliefs that are different from organized religious that you know of?
- I. Would you like to share those beliefs?
- J. Do you have any questions about religious or spirituality that you would like to have answered?
- K. Are you interested in the religious activities here on campus?

I have read the above questions freely and without undue influence or pressure from the Chaplain or any other DYS staff member. I understood the questions asked of me. Any questions that I did not understand, the Chaplain verbally explained to me. Also, I do not have to participate in religious based Campus activities. Furthermore, I understand that religious services at OYDC are Christian based and I have the right to observe and practice my own religious and/or spiritual beliefs. Also, I understand that the Chaplain is on campus to offer religious/spiritual training and/or counseling if I would like it. Additionally, I may discuss any topic, thought, or feeling that I may have with the Chaplain.

Youth's Signature

Date

Chaplain's or Designee 's Signature

Date