**FY 2020 CYS NOFO Application – Appendix 6** Referral Guide/Youth Committee

Please provide the following information regarding the referral guide for each established youth committee:

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| **Youth Committee Name:** |
| **Community Committee Name:** |
| **Check Committee Status:  New  Established** |
| Describe if, how and when (include dates) the referral guide was developed, updated and distributed in the past twelve months. |
| Describe how will the referral guide will be developed, updated and distributed in FY2020? |