***2021 YST Staff Instructions***

If you would like your clients “adopted” this year, please click the link below and complete the Web form. Anyone with access to the internet can complete the form. No special programs required.

**Please have your client wish list forms completed by November 15, 2021!**

**Form link:** https://www.yst.org/staff-goh

This is the same form used last year. Please feel free to contact Lynn 918-382-4484 or lstarnes@yst.org with questions.

**Gifts of Hope Timeline**

**Oct. 1th - Staff Instructions are sent and web link is open.**

**Nov. 12th - Call for adopters go out on email.**

**Nov. 15th - Deadline for staff to submit wish lists for clients (Not Shelter and Outreach)**

**Nov. 22th – Community starts adopting**

**Dec. 3rd – Deadline for Outreach and Shelter**

**Dec. 6th – Deadline for community to bring gifts**

**Dec 8th – Last day gifts can be accepted**

**Dec 9th-10th – Shopping Days**

**Dec 13th – 17th - Holiday Parties**

Log on to https://www.yst.org/staff-goh and select the appropriate button:

* Client
* Child of Client
* Sibling of Client

**Click the present!**

****

**Client Sample Form:**

Name: (First name, First Three Initials on Last name) example: Ted Reb

Age: (Fill in the blank)

Favorite Color: (fill in the blank)

Snack: (2-3 choices, no drinks.) Example: Twinkies and Hershey Bars

**Needs and Wants! - You can pick four (3) total items. NO Bikes or Skateboards please!**

**Need 1:** (Please select 1 need from the following list: Tent, Sleeping Bag, Backpack, Buss Pass, Clothing (Jeans, Shoes, Robe, Coat, Shirts (2), Household item (Comforter, sheets, towels set (Bath, hand, washcloth), dishes, flatware, toaster))

Example: Buss Pass

**Need 2:** (Please select 1 need from the following list: Tent, Sleeping Bag, Backpack, Buss Pass, Clothing (Jeans, Shoes, Robe, Coat, Shirts (2), Household item (Comforter, sheets, towels set (Bath, hand, washcloth), dishes, flatware, toaster))

Example: Toaster

**These are fill in the blank boxes, you may have a client that needs a shower curtain instead of towels… this allows you to make that change. Items selected must stay within these categories. If you have a questions about an item, please ask!**

**PLEASE ONLY PUT ONE ITEM PER BOX… if multiple items are listed, only the first item listed will be sent to adopter.**

If Clothing/shoes are selected above, please note style and size: Example: Running shoe/Ladies 8, Work Coat/Mens 44 \***\*\*\* Please avoid brand names\*\*\*\*\***

**Want:** (Please select one from the following list: purse, wallet, watch, cologne, jewelry, books, CD, DVD, headphones, Mp3 player. Example: Harry Potter Book, Silver Hoop Earrings, Taylor Swift CD, Star Wars DVD) $35 value.

Program:

YST Staff:

Comments/Notes: This is for anything additionally we need to know! Allergies, special circumstances or special needs.

Please be as specific as possible!

**Just click the link and go! Form link:** https://www.yst.org/staff-goh

**Child of Client Sample Form:**

Name: (First name, First Three Initials on Last name) example: Ted Reb

Does the child live with the client?

 Yes – Complete the wish list below

 No – complete the single gift line

Age: (Fill in the blank)

Please note the client’s name:

Example: Ted Reb sister

Favorite Color: (fill in the blank)

Snack: (2-3 choices, no drinks.) Example: Twinkies and Hershey Bars

If the child does not live with the client – Please enter a single (1) age appropriate gift:

(Baby doll, hot wheels, logos)

**Needs and Wants! - You can pick four (3) total items. NO Bikes or Skateboards please!**

**Note: If you are completing this list for a child or sibling, please select a daily need (clothes, shoes, diapers) and an age appropriate want.**

**If child lives with client please complete: Need 1:**

**If child lives with client please complete: Need 2:**

**Note: If you are completing this list for a child or sibling, please select a daily need (clothes, shoes, diapers) and an age appropriate want.**

**PLEASE ONLY PUT ONE ITEM PER BOX… if multiple items are listed, only the first item listed will be sent to adopter.**

If Clothing/shoes are selected above, please note style and size: Example: Running shoe/Ladies 8, Work Coat/Mens 44 \***\*\*\* Please avoid brand names\*\*\*\*\***

**If child lives with client please complete: Want:**

Program:

YST Staff:

Comments/Notes: This is for anything additionally we need to know! Allergies, special circumstances or special needs.

**Just click the link and go! Form link:** https://www.yst.org/staff-goh

**Siblings of Client Sample Form:**

Name of sibling: (First name, First Three Initials on Last name) example: Ted Reb

Age: (Fill in the blank)

Please note the client’s name:

Example: Ted Reb sister

Favorite Color: (fill in the blank)

Snack: (2-3 choices, no drinks.) Example: Twinkies and Hershey Bars

If the child does not live with the client – Please enter a single (1) age appropriate gift:

(Baby doll, hot wheels, logos)

**Needs and Wants! - You can pick four (3) total items. NO Bikes or Skateboards please!**

**Note: If you are completing this list for a child or sibling, please select a daily need (clothes, shoes, diapers) and an age appropriate want.**

**If child lives with client please complete: Need 1:**

**If child lives with client please complete: Need 2:**

**PLEASE ONLY PUT ONE ITEM PER BOX… if multiple items are listed, only the first item listed will be sent to adopter.**

If Clothing/shoes are selected above, please note style and size: Example: Running shoe/Ladies 8, Work Coat/Mens 44 \***\*\*\* Please avoid brand names\*\*\*\*\***

**If child lives with client please complete: Want:**

Program:

YST Staff:

Comments/Notes: This is for anything additionally we need to know! Allergies, special circumstances or special needs.