



## **Arizona Refugee Resettlement Program Refugee Support Services Rights and Responsibilities**

The Arizona Refugee Resettlement Program (RRP) provides Refugee Support Services (RSS) set-aside Refugee School Impact Program (RSI) services to refugees and other eligible beneficiaries specified by RRP, resettled in Arizona through the Refugee Support Services Program (RSS). The goals of RSI are to promote academic success in formal schooling and holistically serve families of eligible children. As a refugee or any other eligible beneficiary, you have the right to receive RSI services under RSS. The following sections contain the client's rights and responsibilities of the program:

### **Client Rights:**

1. By enrolling in RSS, you are entitled to RSS set-aside RSI services. The services will be provided by the RSI Provider.
2. Your eligible services are for up to two (2) to five (5) years from your date of arrival or grant of qualifying status. The services will be provided by the RSI Provider.
3. Upon Enrollment into RSI, every member of your family will receive a customized Self-Sufficiency Plan (SSP). The SSP shall reflect your particular needs rather than a normalized service delivery procedure. The SSP shall be jointly developed between the RSI Provider and clients. The SSP shall serve as a mutual agreement that documents specific needs and definite goals, timeframes, actions required to meet those goals, and the clear responsibilities of all parties.
4. Your SSP is a guide for the implementation of services offered to you by your provider through SSP. The following is a list of services that are offered to you throughout your first five (5) years in the U.S., from your date of arrival or grant of qualifying status:

### **Children ages from 0-5**

1. Receive assistance in searching for and enrolling in childcare services.
2. Receive assistance in searching for early childhood education that fosters academic and social preparation of children for formal schooling (preschool or kindergarten) and receive assistance with enrolling children into the public school system.

### **Children ages from 5-18**

1. Receive assistance with enrolling in English Language Training (ELT), tutoring, behavioral health supports, and programming that supports effective integration.
2. Receive assistance with enrolling children into the public school system.
3. Receive assistance with navigating the U.S education system.

### **Parents**

1. Receive assistance with obtaining parental resources and navigating the U.S education system.
2. Receive assistance with education on parenting classes that include orientation to U.S child welfare laws.

### **Client Responsibilities:**

In order to receive assistance with the aforementioned services, you, as a client, must stay in compliance with the following conditions. Failure to remain in compliance with the following conditions may result in termination of the service offered to you:

1. Treat RA staff with dignity and respect at all times.
2. Comply with the responsibilities listed in your SSP.
3. Inform your case manager of any barriers that develop which would prevent you from fulfilling your responsibilities as listed in your self-sufficiency plan.
4. Keep all scheduled appointments with your case manager. Should you be unable to keep an appointment, you must inform your case worker prior to the scheduled appointment.
5. Inform your case manager if any of the following conditions apply to you:
  - a. You have moved or plan on moving
  - b. Your address changed
  - c. Your phone number changed

I \_\_\_\_\_ confirm that I fully understand the contents of this document and agree to comply with all responsibilities as listed in the Responsibilities section to receive the services that are enumerated under the Rights section of this document. I understand that failure to comply with the responsibilities section of this document may result in termination of services rendered to me under RSSP, and I am fully aware of the services that are offered to me by the agency under RSSP.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Agency Staff Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Interpreter Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I \_\_\_\_\_ confirm that I fully understand the contents of this document. I am fully aware of the services that are offered to me by my RA under RSSP and decline the services that are offered to me under RSSP.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Agency Staff Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Interpreter Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_