## Agreement of Understanding for Y U Team Membership

I,	, agree to serve as a forYOU Team for a minimum of		
	e year. I agree to the following commitments:		
	. Attend mandatory for YOU Team initial training session as scheduled.		
2.	2. Participate in for YOU team interventions, meetings and education presentations (estimated at 3-8 hours) per quarter.		
3.	. Attend a minimum of 50% of monthly for YOU team meetings per year.		
4.	Complete report for each encounter in a timely manner.		
5.	5. Maintain strict confidentiality regarding delivery of crisis support services, including topics discussed and personnel involved. Refrain from taking personal notes regarding case specific information. Any breech in confidentiality will result in immediate removal of the individual from the team.		
6.	Abide by the established team protocols and operational	guidelines.	
7.	Provide at least a four week notice to the for YOU team facility lead in voluntary separation situations.		
	ad and understand these commitments and agree to serve as Feam for a one-year period.	a member of the	
forYOU '	Team Applicant (Signature)	(Date)	
The forY team men	OU Team Coordinator and Facility Lead(s) agree to the mbers:	following commitments to	
1.	Provide the initial/formal for YOU Team training for new in	nembers.	
<ul><li>2. Offer support to team members after for YOU team activation as necessary.</li><li>3. Regularly evaluate team operations and membership.</li></ul>			
			4. Arrange 24 hour/7days a week access via text pager.
Team Fac	cility Lead (Signature)	(Date)	
Team Co	oordinator (Signature)	(Date)	