Organization/Agency:

Name of program:

Name/Title of Person Completing Report:

Please check one:

☐ MID-YEAR – October 2020 through February 2021 (Due by March 27, 2021)

☐ Report on *FULL YEAR* - October 2020 through July 2021 (Due by August 31, 2021)

***\*Final Invoices due by August 31, 2021\****

**1. Please detail your activities, for your evidenced based program, for this reporting period (workshops/trainings held, information distribution, etc…).**

**2. Please provide data that shows that your program benefited the children and families served (ie. performance measures, outcomes, objectives).**

|  |
| --- |
|  |

**3. How many parents of children age 8 and under have you served *with this program/funding* during this reporting period? \_\_\_\_\_ How many had income below 200% of the federal poverty level? \_\_\_\_\_\_**

**4. How many children age 8 and under have been impacted *by this program/funding* during this reporting period? (how many children age 8 and under do the parents you served have?)** \_\_\_\_\_

**How many had income below 200% of the federal poverty level? \_\_\_\_\_\_\_**

**5. How many families did you serve *with this program/funding* during this reporting period? \_\_\_\_\_\_ How many had income below 200% of the federal poverty level? \_\_\_\_\_\_\_\_**

**6. Total amount of money allocated under the grant $\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Total amount of money spent to date $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**All invoices must be received by August 31, 2021 to be considered for payment.**

**Invoices received after August 31, 2021 will not be paid.**

**Please save the completed reports as Word (.doc) documents and email to Chrissy Blackwell at** **christina.blackwell@jcisd.org****.**

***No handwritten reports please.***