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| **2020-2021 Reporting Quarters** |
| [ ]  Quarter 1December 2020-March 2021  | [ ]  Quarter 2April 2021-June 2021 | [ ]  Quarter 3July 2021–September 2021 | [ ]  Quarter 4October 2021-December 2021 |

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| **Grantee:**       | **Date:**       |
| **Prepared by:**       | **Phone:** (     )       -       |
| **Title:**       | **Email:**       |

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| Please enter the Federal Congressional District(s) of where services are provided:  | Visit <http://www.house.gov>, to use the zip code(s) of the area(s) served by the project to determine the Federal Congressional District(s).      |
| Is this award used to implement evidence-based programs? | Yes [ ] No [ ]  |
| If yes, select one source from which the program model was cited: |  Blueprints for Violence Prevention CASEL (Collaborative for Academic, Social, & Emotional learning) Centers for Disease Control and Prevention Community Guide to Helping America’s Youth Department of Education Safe, Disciplined, & Drug-free Schools Drug Strategies, Inc. Making the Grade Hamilton Fish Institute Institute for Medicine NIDA Preventing Drug Abuse National Institute of Justice What Works Report OJJDP Model Programs Guide Promising Practices Network SAMSHA Model Programs Surgeon General’s Youth Violence Report Other (e.g., State model program resources) |
| If other, please specify: |       |
| Please indicate the name of the evidence-based program implemented: |       |

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| **Project Youth Demographics** |
|  | **Group(s) Served This Quarter** | **Group(s) Project Specifically Targets** | **# of Project** **Youth Served This Quarter** |
| **American Indian/Alaskan Native****Asian****Black/African American****Hispanic or Latino****Native Hawaiian & Other Pacific Islander****Other****White/Caucasian****Youth Population not directly served** | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  |  |
| **Male****Female****Youth Population not directly served** | **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]**  |  |
| **0-10****11-13****14-15****16-18****Over 18****Youth Population not directly served** | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  |  |
| **At-Risk Population (no prior offense)****First Time Offenders****Repeat Offenders****Sex Offenders****Status Offenders****Violent Offenders****Youth Population not directly served** | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  |  |
| **Rural****Suburban****Tribal****Urban****Youth Population not directly served** | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]** **[ ]** **[ ]**  |  |
| **Mental Health****Substance Abuse****Truant/Dropout** | **[ ]** **[ ]** **[ ]**  | **[ ]** **[ ]** **[ ]**  |  |

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| **Program Category** |
| **Primary**  | **Secondary** | **Program Category** | **Program Designation** | **Allocated Amount** |
|       |       | Aftercare/Re-entry  |       |       |
|       |       | Alternatives to Diversion  |       |       |
|       |       | Community based programs |       |       |
|       |       | Diversion |       |       |
|       |       | Mental Health |       |       |
|       |       | Mentoring, Counseling and Training Programs |       |       |

*Please provide an update on your efforts with respect to administering the project*

*as outlined in the original grant Request for Proposals by addressing the following questions.*

1. Year 2 Grant Award Amount - $

Amount Invoiced Year-to-Date (Sum of Quarterly Invoices) $

Percent of Award Invoiced-to-Date (Amount above ÷ Annual Award)       %

1. In relation to the overall project budget, are grant funds being expended as planned and on schedule? [ ]  Yes [ ]  No

If not, explain why and describe what expenditure plan(s) exist for the duration of the grant period.

1. Are all authorized positions filled and performing grant-related duties? [ ]  Yes [ ]  No

If not; explain why and what hiring plan(s) exist to fill those positions.

1. Describe the activities/actions taken this reporting period on the implementation of the direct service project, building project infrastructure and/or sustainability planning.

1. Discuss any collaborative efforts undertaken this reporting period with stakeholders (e.g., probation, local law enforcement, community-at-large).

1. Provide information regarding activities for evaluation planning and data infrastructure that will assist progress toward the project’s goals and objectives in Year 2.

1. What were your accomplishments within this reporting period?

1. What goals were accomplished, as they relate to your grant application?

1. What problems/barriers did you encounter, if any, within the reporting period that prevented you from reaching your goals or milestones?

1. Is there any assistance that the BSCC can offer you to address any problems/barriers identified in question #7 above?

1. Are you on track to fiscally and programmatically complete your program as outlined in your grant application?

1. What major activities are planned for the next six months?

1. Based on your knowledge of the juvenile justice field, are there any innovative programs/ accomplishments that you would like to share with the BSCC?

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| Quarterly Progress Reports- Parts A & B are due 45 days from the end of the reporting period.Please email completed forms to: BSCC JJ\_Grants| JJ\_Grants@bscc.ca.govFor questions, please email or call Deanna Ridgway| deanna.lbridgway@bscc.ca.gov | 916-322-8088 or Timothy Polasik | timothy.polasik@bscc.ca.gov| 916-621-2853 |

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| Date Reviewed:       | Date entered. into DC-TAT:       | Reviewed by:       |
| Comments:       |