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| **2020-2021 Reporting Quarters** | | | |
| Quarter 1  December 2020-  March 2021 | Quarter 2  April 2021-  June 2021 | Quarter 3  July 2021–  September 2021 | Quarter 4  October 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.gov  For 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: | | |