



## ANNUAL PROGRESS REPORT

for Grantees

July 1, 200\_ - June 30, 200\_

<b>PROGRAM/ SERVICE NAME:</b>		
<b>IMPLEMENTING AGENCY:</b>		
Total Grant for SFY 200_ : \$		
Amount expended through 06/30/0_ : \$	=	% of Total
<b>REPORT WRITTEN BY:</b>		
Date:		
Phone:		
E-mail:		

Please report progress for each deliverable supported with money from the Ohio Children's Trust Fund using the following format:

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Deliverable #\_\_\_: state deliverable & total units of service to be provided with Children's Trust Fund monies for the entire year (as specified in your funding agreement).

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Number of service units actually provided =  
*This represents* % of total units projected for the year.

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If units actually provided are less than 90% of the total projected for the fiscal year, please explain what impaired achievement.

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What challenges were encountered with regard to achievement of this deliverable?

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How did you address these challenges?



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**OUTCOMES: How does each participant benefit as a result of this service ?**

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**EVALUATION: How is the benefit to each participant determined?**

- " Customer Satisfaction Survey
- " Pre-test/ Post-test
- " Self Report of Benefit(s)
- " Outcome Evaluation-Instrument(s)

Utilized: \_\_\_\_\_

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**Attach a summary of the results  
of all evaluations or surveys completed.**

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**IMPACT: How does provision of this deliverable function to prevent child abuse or neglect?**

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rrrrrrrrrr **REPEAT THIS FORMAT FOR EACH DELIVERABLE** rrrrrrrrrr

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**Printed Name of Authorized Official**

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**Signature of Authorized Official**

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**Date**