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| **Board of State & Community Corrections****Proud Parenting Grant Program****Quarterly Progress Report – Part A** |



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| **Grantee:**       | **BSCC Grant Award Number:**       |
| **Project Title:**       | **Date:**       |
| **Prepared by:**       | **Phone:**       |
| **Title:**       | **Email:**       |

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| **Year 1 Reporting Quarters** |
| [ ]  Quarter 1July 1-September 30, 2018Due: November 15, 2018 | [ ]  Quarter 2October 1-December 31, 2018Due: February 15, 2019 | [ ]  Quarter 3January 1-March 31, 2019Due: May 15, 2019 | [ ]  Quarter 4April 1-June 30, 2019Due: August 15, 2019 |

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| **SECTION 1** |

Provide an update on your fiscal efforts with respect to administering the project as outlined in the grant proposal by addressing the following questions specific to the reporting quarter identified above.

1. **Expenditure Status:**

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| Proud Parenting Year 1 Award Amount - $       |
| Amount Invoiced-to-Date (Sum of Quarterly Invoices-to-Date) | $       |
| Percent of Award Invoiced to Date (Amount above ÷ Award Amount) |      % |
| Proud Parenting Match Amount - $       |
| Match Amount Recorded-To-Date (Sum of Quarterly Invoices) | $       |
| Percent of Match Recorded-To Date (Match Amount Above ÷ Obligated Match Amount) |      % |

1. **In relation to the overall grant budget, are state Proud Parenting Grant Project funds being expended as planned and on schedule?** **[ ]**  Yes **[ ]**  No

**If no, explain why and provide an expenditure plan(s) for the project to come into compliance during the grant period.**

1. **In relation to the overall Grant Match requirement, are local match dollars being used/leveraged as planned and on schedule?** **[ ]**  Yes **[ ]**  No

**If no, explain why and provide an expenditure plan(s) for the project to come into compliance, making sure contractually obligated matching funds are provided for within the grant period.**

1. **Are all grant funded positions filled (includes the lead agency and any subcontracted agencies) this reporting period?** **[ ]**  Yes **[ ]**  No

**If no, which grant funded positions are unfilled and why? What is the proposed timeline to fill them?**

1. **How did the project match/leverage funds this reporting quarter? Include the source and the amount of the leveraged funds.**

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| **SECTION 2** |

Provide an update on your programmatic efforts with respect to administering the project as outlined in the grant proposal by addressing the following questions specific to the reporting quarter identified above.

1. **Overall Activities Implemented**: Describe project activities this reporting period (hiring of staff, process development/improvement, service delivery, collaboration efforts, evaluation planning/implementation).

1. **Overall Project Challenges:** Identification and Resolution- Describe any challenges/issues the project has encountered during the reporting period. Consider what may be affecting project effectiveness or may have the potential of affecting program outcomes and stated goals. Examples of areas where problems may exist are program administration, service delivery, rate of referrals, and participant enrollment or participation, agency processes. Describe the plan to resolve identified challenges.

1. **Overall Accomplishments and Highlights:** What successes (other than participant-specific) has the project achieved (*e.g., reaching participant enrollment for the period, reaching other stated project goals, recognition from public officials and/or other jurisdictions/agencies, receiving media coverage*)? Include any training project staff and/or local partnering agencies have received this reporting period.

1. **What quality assurance methods are in place to ensure all programs/services are delivered as intended and with fidelity to the approaches described in the original proposal?**

1. **What modifications, if any, have been made to programs and/or services funded with Proud Parenting Program Grant dollars?**

1. **Other Comments, Observations, and/or Project Notables:**

1. **Case Study/Anecdotal Information:** Case studies are often the most compelling evidence of the value of a program. With this in mind, provide a brief description of a client enrolled in your project (e.g., age, gender, race, system-involvement history, etc.), challenges with engaging and/or serving the client, and how the project is positively impacting him/her and their family.

*Do not identify participant by name.*

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| **SECTION 3** |

Section 3 lists the goals and objectives developed by the grantee and provided to the BSCC. There are three (3) questions for each goal/objective listed. Provide responses specific to this reporting quarter below.

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| * **Goal 1:**

**Objectives:** • (Objective 1a from RFP)      • (Objective 1b from RFP)      • (Objective 1c from RFP)      1. **Describe progress towards the stated goal and objectives during the reporting period.**

     1. **Describe any challenges towards the stated goal and objectives during the reporting period.**

     1. **If applicable, what steps were implemented to address challenges.**

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| * **Goal 2:**

**Objectives:** • (Objective 2a from RFP)      • (Objective 2b from RFP)      • (Objective 2c from RFP)      1. **Describe progress towards the stated goal and objectives during the reporting period.**

     1. **Describe any challenges towards the stated goal and objectives during the reporting period.**

     1. **If applicable, what steps were implemented to address challenges.**

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| * **Goal 3:**

**Objectives:** • (Objective 3a from RFP)      • (Objective 3b from RFP)      • (Objective 3c from RFP)      1. **Describe progress towards the stated goal and objectives during the reporting period.**

     1. **Describe any challenges towards the stated goal and objectives during the reporting period.**

     1. **If applicable, what steps were implemented to address challenges.**

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| **SECTION 4** |

Section 4 asks questions related to technical assistance and provides space for any additional information the grantee would like to report. Provide responses specific to this reporting quarter below.

1. **Would you like technical assistance? If so, describe the nature of the request.**

1. **What type of additional training could the project benefit from?**

1. **Other - Provide any additional information on the grant, its implementation, programming, etc. below.**

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| **SUBMITTAL INFORMATION** |
| Please submit both Progress Report Part A & Part B via email to: PP\_Grants@bscc.ca.govIf you have any questions, please contactHelene Zentner at 916.323.8631 or helene.zentner@bscc.ca.gov |