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| **SECTION 1: PROJECT INFROMATION** | | | |
| **GRANTEE NAME:** City of Perris | | | |
| PROJECT TITLE: Project Peace (Protective factors Enacted to Advance Capable and Empowered families and youth) | | | |
| **AGREEMENT NUMBER:** 854-17 | | **AWARD TOTAL:** $500,000 | |
| **REPORTING PERIOD (check applicable period):** | | | |
| **5/1/18- 9/30/18**  **Due: 11/15/18** | **10/1/18- 12/31/18**  **Due: 2/15/19** | **1/1/19- 3/31/19**  **Due: 5/15/19** | **4/1/19- 6/30/19**  **Due: 8/15/19** |
| **7/1/19- 9/30/19**  **Due: 11/15/19** | **10/1/19- 12/31/19**  **Due: 2/15/20** | **1/1/20- 4/30/20**  **Due: 6/15/20** |  |

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| **SECTION 2: GOALS AND OBJECTIVES** |
| This section lists the goals and objectives contained in the original proposal. It is intended to capture your progress toward implementation of each objective, answering questions like: *Are the necessary staff in place? Are referrals coming at the rate you thought they would? Have services been implemented? Are classes being held? Have staff received training? Are pre- and post-tests being administered consistently? Is the evaluator who will measure this outcome in place? Is the evaluator meeting regularly with partners? Are data collection agreements in place?* This is the not the place to report numerical data; that will be captured on Part 2 of the Progress Report. Provide clear and complete narrative responses, specific to this reporting period. |

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| **Goal (1)** | | **School-Based Program:** Increase the number of youth adopting skills and strategies that lead to resiliency. | |
| **Objectives:** | | 1. Provide 30 sessions (30 minutes) of Botvin Life Skills Training (LST) to at least 1,000 7th through 10th grade students each year with 80 percent completing all sessions and demonstrating behaviors and learning that significantly reduces delinquency and violence. 2. Provide after school restorative justice circles and one-on-one or group mentoring for one hour a week for up to 120 school counselor referred students identified as high-risk. 3. Facilitate ‘Peer Led Groups (PLG)’ that will train a minimum of 80 youth in advocacy (using the PLUS model) resulting in four (4) school anti-violence campaigns; 2 community service learnings. | |
| 1. | Describe progress toward objectives A-C: | | (Type Response Here) |
| 2. | Describe any challenges towards meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **Goal (2)** | | **Component # 2-Summer Program:** Increase healthy alternatives or prosocial activities available to youth during non-school hours (weekends, before or after school) that prevent participation in risky behaviors and reduce likelihood of youth’s participation in violence. | |
| **Objectives:** | | 1. To provide PEACE Summer Program services to a minimum of 120 youth each year (240 total). 2. To engage 120 participating youth in at least two communities-wide anti-violence campaign each summer (240 total). | |
| 1. | Describe progress toward objectives A-B: | | (Type Response Here) |
| 2. | Describe any challenges toward meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **Goal (3)** | | **Component #3-Family/Community Program:** Reduce violence in the community through community-scale anti-violence activities. | |
| **Objectives:** | | 1. Four Family/Community Engagement Sessions will engage the community in the Citywide campaigns. 2. Host an anti-violence symposium that will engage over 300 area residents to support the Anti-Violence Campaign (including attending at least two of Family/Community Engagement sessions). 3. Provide wraparound case management services to a minimum of 40 families each year with 75 percent (30) of the identified families utilizing coordinated supportive services or skills trainings. | |
| 1. | Describe progress toward objectives A-C: | | (Type Response Here) |
| 2. | Describe any challenges toward meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **SECTION 3: NARRATIVE QUESTIONS** |
| This section asks common questions of all CalVIP grantees. Provide clear and complete responses, specific to this reporting period, to each question below. |

1. **In relation to the overall budget, are grant funds being expended as planned and on schedule?**

Yes  No

1. **If no, explain why and describe the plan to correct it.**

1. **In relation to the overall grant budget, are match funds being expended as planned and on schedule?**

Yes  No

1. **If no, explain why and describe the plan to correct it.**

1. **Are all grant-funded positions filled (includes the lead agency and any contracted agencies)?**

Yes  No

1. **If no, which grant-funded positions are unfilled, why, and what is the timeline to fill them?**

1. **How does your project ensure services are provided to the target population, as specified in the original proposal?**

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. **If applicable, describe any grant-funded trainings occurring during the reporting period. Include the date(s), number of attendees and list of participating agencies.**

1. **Describe at least one grant-funded accomplishment during this reporting period.**

1. **Describe any significant grant-funded activities occurring in the next reporting period (e.g. trainings, community events, etc.)**

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| **SECTION 4: OTHER/TECHNICAL ASSISTANCE** |
| This section allows grantees to include information not captured in other sections and to request technical assistance. |

1. **Would you like to request technical assistance? Please check one:**

Yes  No

1. **If yes, describe the nature of the request:**

1. **Provide any additional information (not already covered in other sections) that you think is important to share with BSCC, including media coverage, awards or recognition, special events, etc**.

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| **REPORT SUBMISSION** | |
| **PREPARED BY:** | **TITLE:** |
| **EMAIL:** | **TELEPHONE NUMBER:** |
| **DATE SUBMITTED:** | **DATE RECEIVED:** |
| **BSCC CONTACT INFORMATION** | |
| Please email **Parts 1 and 2** to [CalVIP@bscc.ca.gov](mailto:CalVIP@bscc.ca.gov). For questions please contact Angela Ardisana at (916) 323-8580 or <angela.ardisana@bscc.ca.gov>. | |