

Louisiana Commission on Law Enforcement and
Administration on Criminal Justice



Quarterly Progress Report
For
Juvenile Accountability Block Grant Program

Subgrant Number (Current): _____ Date: _____
Subgrantee: _____
Project Title: _____
Address: _____
City, State, Zip Code: _____
Report Completed By: _____
Project Director: _____
Project Director's Signature: (IN BLUE) _____
Area Code, Telephone: _____

CHECK THE QUARTER IN WHICH THE ACTIVITY OCCURRED

This is the final report.

FOR LCLE OFFICE USE ONLY

Report Type: () Quarter () Final Report
Grants Personnel Rec'd & Date: _____ Data Entered By & Date: _____
Program Manager Approval & Date: _____ GMIS Final Entry & Date: _____

All subgrantees receiving JABG subgrants administered by the Louisiana Commission on Law Enforcement must complete and submit Quarterly Progress Reports to LCLE on this form.

<u>Reporting Period</u>	<u>Due to LCLE</u>
January - March	April 15
April - June	July 15
July - September	October 15
October - December	January 15

If a project ends within a reporting period, the final reports are due to LCLE within 15 days at the conclusion of the project.

Failure to Comply with Reporting Requirements may result in administrative action such as, withholding of payments, suspension of funding, cancellation of the project, loss of awarded funds, or non-certification of new grant awards.

No question is to be left blank. If a question is not applicable, check "Does Not Apply". Any progress report with blank items is subject to being returned to the subgrantee as "Incomplete." Any request for funds will not be honored until a "Completed and Approved" progress report is submitted to LCLE.

ALTERATIONS TO THIS LCLE FORM WILL NOT BE ACCEPTED.

1. JUVENILES STATISTICS: Enter the number of **NEW** youths that entered the program **FOR THIS REPORTING PERIOD ONLY**. Does not apply.

There were no new youths entering the program during this reporting period.

Age/Sex	White/ Caucasian	Black/ African- American	Hispanic/ Latino (of any race)	Asian	American Indian/ Alaskan Native	Native Hawaiian & Other Pacific Islander	Other	Total
0-11 Male								
11-18 Male								
Over 18 Male								
0-11 Female								
11 - 18 Female								
Over 18 Female								
Total								

Referring to the above table, explain the reason for the individual 18 years of age or older entered the program during this period. Does not apply.

2. TOTAL YOUTHS SERVED: Does not apply to this project.

Report # (This is the starting month of the project) State month(s) covered	1	2	3	4	
# Carried Over from Previous Qtr./Fiscal Year					
# New Admissions					
# Total Served During Quarter					
# Successfully Completed					
# Premature Termination					

3. TOTAL PARENTS SERVED: Does not apply to this project.

Report # (This is the starting month of the project) State month(s) covered	1	2	3	4	
# Carried Over from Previous Qtr./Fiscal Year					
# New Admissions					
# Total Served During Quarter					
# Successfully Completed					
# Premature Termination					

4. GOAL AND OBJECTIVES:

GOAL:

OBJECTIVES:

5. PROGRESSION OF THE PROJECT. Is the project meeting its goal and objectives as stated in the application?
 Yes No If no, what steps will be taken to achieve the goals and objectives?

6. PERFORMANCE INDICATORS

CORE MEASUREMENTS

#	Measurements	Results During this Quarter	
1	NUMBER AND PERCENT OF PROGRAMS/INITIATIVES EMPLOYING EVIDENCE-BASED PRACTICES		
	A.	Number of program/initiatives employing best practices	A.
	B.	Number of program/initiatives	B.
	C.	Percent A/B	C.
2	NUMBER AND PERCENT OF YOUTH WITH WHOM AN EVIDENCE-BASED PRACTICE IS USED		
	A.	Number of youth with whom a best practice is used	A.
	B.	Number of youth	B.
	C.	Number A/B	C.
3	NUMBER AND PROGRAM YOUTH AND/OR FAMILIES SERVED DURING THE REPORTING PERIOD		
	A.	Total number of youth or youth and families served during the reporting period	A.
	B.	Of the total, the number served who were youth	B.
4	Number and percent of program youth completing program requirements		
	A.	Number of program youth who exited the program having completed program requirements	A.
	B.	Number of youth who left the program	B.
	C.	Percent A/B	C.
5	NUMBER AND PERCENT OF PROGRAM YOUTH WHO OFFEND DURING THE REPORTING PERIOD (SHORT-TERM)		
	A.	Total number of program youth served	A.
	B.	Number of program youth tracked during this reporting period	B.
	C.	Of B, the number of program youth who had a new arrest or delinquent offense during this reporting period	C.
	D.	Number of program youth who were recommitted to a juvenile facility during this reporting period	D.
	E.	Number of program youth who were sentenced to adult prison during this reporting period	E.
	F.	Number of youth who received another sentence during this reporting period	F.
	G.	Percent offending (C/B)	G.
6	NUMBER AND PERCENT OF PROGRAM YOUTH WHO OFFEND DURING THE REPORTING PERIOD (LONG-TERM)		
	A.	Number of program youth who exited the program 6-12 months ago that you are tracking	A.
	B.	Of A, the number of program youth who had a new arrest or delinquent offense during this reporting period	B.
	C.	Number of program youth who were recommitted to a juvenile facility during this reporting period	C.
	D.	Number of program youth who were sentenced to adult prison during this reporting period	D.
	E.	Number of youth who received another sentence during this reporting period	E.
	F.	Percent of long term recidivism (B/A)	F.

#	Measurements	Results During this Quarter	
7	NUMBER AND PERCENT OF PROGRAM YOUTH WHO RE-OFFEND (SHORT-TERM)		
	A.	Number of program youth served	A.
	B.	Number of program youth	B.
	C.	Of B, the number of program youth who had a new arrest or delinquent offense during this reporting period	C.
	D.	Number of program youth who were recommitted to a juvenile facility during this reporting period	D.
	E.	Number of program youth who were sentenced to adult prison during this reporting period	E.
	F.	Number of youth who received another sentence during this reporting period	F.
	G.	Percent recidivism (C/B)	G.
8	NUMBER AND PERCENT OF PROGRAM YOUTH WHO RE-OFFEND (LONG-TERM)		
	A.	Number of program youth who exited the program 6-12 months ago that you are tracking	A.
	B.	Of A, the number of program youth who had a new arrest or delinquent offense during this reporting period	B.
	C.	Number of program who were sentenced to adult prison during this reporting period	C.
	D.	Number of youth who received another sentence during this reporting period	D.
	E.	Percent of long term recidivism (B/A)	E.
9	NUMBER AND PERCENT OF PROGRAM YOUTH WHO ARE VICTIMIZED (SHORT-TERM)		
	A.	Total number of program youth served	A.
	B.	Number of program youth tracked during this reporting period for victimization	B.
	C.	Of B, the number of program youth who were victimized	C.
	D.	Percent C/B	D.
10	NUMBER AND PERCENT OF PROGRAM YOUTH WHO ARE VICTIMIZED (LONG-TERM)		
	A.	Number and program youth who exited the program 6-12 months ago that you are tracking for victimization	A.
	B.	Of A, the number of program youth who were victimized during this reporting period	B.
	C.	Percent B/A	C.
	A.	Total number of program youth served	A.
	B.	Number of program youth tracked during this reporting period for re-victimization	B.
	C.	Of B, the number of program youth who were re-victimized	C.
	D.	Percent C/B	D.
11	NUMBER AND PERCENT OF PROGRAM YOUTH WHO ARE RE-VICTIMIZED (SHORT-TERM)		
	A.	Total Number of youth served	A.
	B.	Number of program youth tracked during the reporting period for re-victimization	B.
	C.	Of B, the number of program youth who were re-victimized	C.
	D.	Percent C/B	D.
12	NUMBER AND PERCENT OF PROGRAM YOUTH WHO ARE RE-VICTIMIZED (LONG-TERM)		
	A.	Number of program youth who exited the program 6-12 months ago that you are tracking	A.
	B.	Of A, the number of program youth who were re-victimized during this reporting period	B.
	C.	Percent B/A	C.

13 (ST)		
	A.	A.
	B.	B.
	C.	C.
D.	D.	

#	Measurements	Results During this Period
13 (LT)		
	A.	A.
	B.	B.
	C.	C.
D.	D.	

#	PURPOSE AREA MEASUREMENTS	Results During this Period
	OUTPUT MEASURES	
		A.
		B.
		C.
		A.
	B.	
	C.	

#	PURPOSE AREA MEASUREMENTS	Results During this Period
	OUTCOME MEASURES	
		A.
		B.
		C.
		A.
	B.	
	C.	

7 Describe the activities that occurred during this reporting period.

8. PERSONNEL CHANGES: Have there been any changes in number and type of personnel positions during this reporting period? Yes No Does not apply.

If Yes, list all new persons employed using grant funds. Provide name, position and resume. Indicate whether full, part time, or over time and employment date. Further, list any vacant personnel positions. Explain the reason for vacancy and what steps were taken to fill the position. Remember a subgrant adjustment must be filed.

9. FUTURE FUNDING: What measures were taken during this reporting period to secure permanent financial support for this project at the conclusion of federal funding?

10. If there are any aspects of the project, which this form does not capture and/or other information such as news articles, please feel free to report these below or attach to this report.