Quarterly Progress Report

Department of Criminal Justice Services 805 East Broad Street Richmond, Virginia 23219 (804) 786-4000

Subgrantee:			Grant Number:				
Project Title:			Date of Report:				
Grant Period:	To:		Final Report?	Yes	No		
Date Project Completed:		Report Perio	od Ending: 9/30	12/31	3	/31	6/30
Program Administrator:			Project Director:				

This progress report is required as part of the program reporting requirements of the Department of Criminal Justice Services. The report should include:

I. Program Activities and Issues

Describe in narrative form the program of your project during this reporting period. If this is a final report, the report should be cumulative as well.

- A. Make reference to the project workplan describing any activities relative to the achievement of objectives. Explain any changes in projected activities and workplan time frames.
- B. Integrate within the narrative an analysis of the data presented on the Evaluation Report Form as it supports the achievement of objectives.

II. Workplan Status Report

Enclosed is a blank workplan with an additional column titled "Status of Activities." As part of this report, you should: (1) Transfer your completed workplan to the blank workplan form; (2) Fill in the column titled "Actual" with the "Begin-End" dates for those activities which have begun and/or have been completed, or objectives which have been met; and (3) Complete the additional column titled "Status of Activities" by briefly describing the progress made toward implementing each of the various objectives/activities during this reporting period. Whenever possible, progress made on project activities should be supported by any relevant documentation and/or data.

III. Evaluation Plan Report

Enclosed is a blank form for reporting data you have collected as part of the evaluation process.

Send a hard *and* electronic copy of this report, including this Face Sheet, the Workplan Status Report, and the Evaluation Plan Report to the Research & Evaluation Section, Department of Juvenile Justice, P.O. Box 1110, Richmond, Virginia 23218. Research & Evaluation will forward all reports, in batch, to DCJS.

DCJS Use Only								
TA Required?	Yes		No			Date:		
Recommendation:								
Action Taken:								
Signature – Program Specialist				Signature – E	Evaluation Specialist			