CONTRACTOR NAME:

DIRECTOR NAME:

REPORTING DATES: July 1, 2017 through December 31, 2017

PERFORMANCE MEASURES

Is your program meeting the number of cases and clients projected for FY18? (Yes / No)

Are you meeting your performance target for Hours of Service delivered? (Yes / No)

Please identify the reason(s) for the increase/decrease in cases, clients, visits and/or exchanges:

COURT REFERRING

How many cases has the Court referred to your program from this period of reporting? \_\_\_\_\_\_\_

Do you feel that the Court is referring enough case(s)? (Yes / No)

Please describe any contact that you’ve had with the court to remedy the situation:

What training program evaluations, audits or other events have you and your staff attended?

Hours:

TRAINING

Describe any challenges that your program has experienced thus far for this year?

Strategies you employed to overcome the challenges:

Were they effective? (Yes / No) If no, please explain:

CHALLENGES

SUCCESSES

Describe any successes your program has experienced in these past 6 months:

How did you employ these achievements?

How effective were they?

COMMENTS AND/OR CONCERNS