|  |  |  |
| --- | --- | --- |
| **Vendor/Grantee:** |  | **Reporting Period** *(Service From/Service To Dates):* |
| **Report/Local Contact Name:** |  |  |
| **Email/Phone:** |  |

|  |  |
| --- | --- |
| **Activities To Be Funded:***Briefly describe activities to be funded including services and/or strategies to be used and the target population. If applicable, also explain how the approach is innovative or creative.* | **Activities Conducted** *Indicate activities conducted during this reporting period.* |
|  |  |

**Insert additional rows above if needed**

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| --- | --- | --- |
| **Outcome Statement***Provide a general statement of the results expected.* | **Outcome Indicator(s)***Specify how you will measure achievement of the results expected.* | **Outcomes Achieved***Indicate progress made towards achieving the expected results.*  |
|  |  |  |
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**Insert additional rows above if needed**

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| [**Community Action Goals**](http://www.nascsp.org/data/images/national%20community%20action%20toc_june%202017.pdf)*Specify which Community Action goal(s), as noted in* [*The National Community Action Network Theory of Change*](http://www.nascsp.org/data/images/national%20community%20action%20toc_june%202017.pdf)*, these outcomes support.* ***Select all that apply****.* |
| [ ]  **Goal 1:** **Individuals and families with low incomes are stable and achieve economic security.**[ ]  **Goal 2: Communities where people with low incomes live are healthy and offer economic opportunity.**[ ]  **Goal 3: People with low incomes are engaged and active in building opportunities in communities.** |