

OMB No.: 0970-0403

Expiration Date: 04/30/2013

MATHEMATICA
Policy Research

PACT
Study MIS

May 23, 2012

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection will be entered after clearance.

Table 1 Study MIS: Item- by- Item Justification

Entry	Rationale
Intake for Random Assignment	
Name Date of birth Social Security number	Required for checking that the applicant is not already a sample member before conducting random assignment. Also needed to obtain administrative data on sample member.
Gender (RF program only) Presence of biological children	Required to screen applicants for study eligibility. In RF programs, study applicants must be male and a parent. In HM programs, at least one partner in the couple must have a biological child under the age of 18 to be eligible for the study.
Whether the father lives with biological children (RF program only) Whether the couple has child together (HM program only)	Required for random assignment. In RF programs, stratification will occur based on whether the father has residential children. In HM programs, stratification will occur based on whether the couple has a child together.
Referral source	Staff will identify how the applicant was referred to the program for descriptive purposes and to predict program participation for the estimation of the impact of the treatment on the treated (see Section 16).
Likelihood of participation in each program component	Staff will provide predictions of the likelihood of participation in different types of program services. This will be used with other baseline information about participants to estimate the impact of treatment on the treated (see Section 16).
Service Receipt	
Client Information Name and nickname Contact information (address, phone numbers, email) Partner/spouse name Enrollment date (default is random assignment date) End date of program involvement Primary reason for ending program, including whether participant completed the program or ended services prior to completion ¹	Client information will allow staff to track and manage clients that are participating in the program. Enrollment date, end date of program involvement, and reason for ending program will be used to describe enrollment patterns.
Group Services–Add or Revise a Workshop Name of workshop Description Whether registration is required to attend Total hours of workshop Intended participants in workshop Category of workshop Agency providing workshop Workshop instructors	RFHM programs will provide some of their services in group settings. Group services, referred to as workshops in the study MIS, will focus on specific topics and may use standard curricula. Workshops will occur during one or more sessions and will last for a varying number of hours. Adding or revising workshops will allow staff to record information about these workshops. This information will be provided once, though staff may revise the information as needed. The information will be used to describe the types of group workshops offered.

Entry	Rationale
<p>Group Services-Add or Revise a Group Within a Workshop</p> <ul style="list-style-type: none"> Name of group Agency providing group Number of sessions Maximum number of participants Meeting day of week and time Start date for group and nonsession dates Location of group Names of group instructors Whether a group is cancelled and cancellation reason, such as insufficient participant enrollment or unable to obtain space to hold the group 	<p>RFHM programs may offer a workshop multiple times. Each time a workshop is offered program staff will identify this as a group in the study MIS. To manage the group, staff will enter descriptive information at the start and may revise that information as needed. Group information will be used to describe the types of group workshops offered.</p>
<p>Group Services-Record Attendance</p> <ul style="list-style-type: none"> Location of session Start and end time of instruction Instructors for session Name of clients attending session Whether client attended session with another individual (if expected in workshop) 	<p>Within a group, there are individual sessions for which staff will document session length, instructors, and client attendance. The study MIS will include multiple options for recording attendance depending on whether a group has a set of clients registered or is open to any client and whether the group is supposed to be attended by only the client or by the client and another member of his family, such as a partner or child. Information on attendance will be used to describe the types of services offered and participation patterns.</p>
<p>Service Contact</p> <ul style="list-style-type: none"> Date of contact Length of contact Whether client was present at contact Service contact mode and location Content of service contact Person providing service contact Was client referred to another agency during service contact 	<p>RFHM programs offer some services in one-on-one settings. For each individual service, referred to as a service contact in the study MIS, staff will record the contact date, length, location, and content (for example, parenting, economic stability, domestic violence, or emergency needs). This information will be used to describe the types of services offered and participation patterns.</p>
<p>Referrals</p> <ul style="list-style-type: none"> Date of referral Whether referral was verbal or written Name of agency to which client referred Type of service for which client referred 	<p>RFHM programs provide clients with referrals to other organizations that may be able to address specific client needs. In the study MIS, staff will document when referrals are provided by providing the date and type of referral and listing the agency to which the client is referred and type of service sought. Referral information will be used to describe the types of services offered.</p>

¹ We will work with program staff to define program end.

STUDY MIS WIREFRAMES

The study MIS wireframes depict the planned arrangement of the study MIS website’s content, including data elements and navigation instructions. Each wireframe has a descriptive title and represents a planned screen in the study MIS. There are wireframes for five sets of screens:

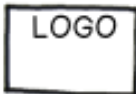
- Screens starting with “G” (G1 – G9) are general screens to assist system users with navigating the study MIS and organizing the entry of information. The general screens will be tailored to a specific user. A welcome screen (G1) will include a message board listing announcements or reminders from program or evaluation contractor staff. Screen G2 will allow users to search for and locate clients and screen; G3 will display results of this client search. Screens G4 through G6 will depict a user’s personalized pages providing access to upcoming appointments (G4), client information for the user’s caseload (G5), and agency information for common referral organizations (G6). The top of these pages will identify the user. Screen G7 will provide summary information on the user, for example his or her phone number and email address, and can be updated by the user, as needed. Screen G8 will allow users to add appointments, including their date and time; information entered on screen G8 will appear on the appointment list on the user’s page (G4). Screen G9 is for managing information on referral agencies.
- Screens starting with “RA” (RA1 – RA3) are for the intake and random assignment process. Screen RA1 will include all information to be completed by the staff member prior to random assignment. Screens RA2 and RA3 will display results of random assignment: screen RA2 will depict what the staff member will view when a client is successfully randomly assigned; screen RA3 will depict what the staff member will view when a client submitted for random assignment is flagged as someone who has already been randomly assigned.
- Screens starting with “C” (C1 – C7) are for documenting individual services provided to a client. Information about the client’s activities is recorded on screens C1 through C4. Screen C1 will provide recent activity for a client, including their current participation status, upcoming appointments, and recent service contact history. Screen C2 will provide a summary of all client contact information gathered by program staff and screen C5 will allow users to enter or modify this information. Screen C3 will provide a summary list of all referrals provided to the client. The “Workshop Activity” page (C4) will provide a list of all current and past workshops for the client. Screen C6 will allow staff to document each contact with or service provided to the client. For each contact or service, the study MIS will capture the date, length, and location of the contact, participants, content, and the staff member providing the service. If a referral is provided, system users will enter information on the referral on screen C7.
- Screens starting with “W” (W1 – W9) are for tracking and managing workshops. The study MIS defines a *workshop* as any group activity that is offered by the program and may include classes or support groups. Workshops may require registration—with a regular set of attendees—or be open to any client from the program. Many workshops offered by RF programs have multiple *sessions*. For example, a workshop may be entitled “How to Become a Great Dad” and include weekly one-hour sessions. Programs may provide opportunities to attend the workshop at different times and days, with different facilitators, and/or with different start dates. For example, “How to Become a Great

Dad” may be offered on Tuesday evenings facilitated by Mr. Smith starting on April 6th and on Saturday mornings facilitated by Mr. Jones starting on May 6th. For the purposes of the study MIS, we define a *group* as a predefined complete set of sessions of a workshop. In the example above, the workshop is “How to Become a Great Dad” and the group is the six sessions on Tuesday evenings beginning on April 6th and facilitated by Mr. Smith.

Screens W1 and W2 will provide a summary of all workshops and will allow users to enter descriptive information for new workshops as well as update information for existing workshops. When programs run a group of a workshop, program staff will enter descriptive information about the group, such as the meeting days and time, the group start date, the facilitator, and the total number of sessions on screen W3. To help programs manage workshops, screen W4 will provide summary information about a particular workshop and the groups that are associated with that workshop. If an existing group needs to be canceled, program staff will use screen W5 for this action. Similarly, screen W6 will be used for canceling or postponing specific sessions of a group. Program staff will use screen W7 to assign clients to a group; the screen will allow programs to manage the number of the clients in a group to ensure appropriate group size.

- Screens starting with “A” (A1 – A7) are for documenting attendance at group sessions. The managing sessions screen (screen A1) will allow program staff to see which sessions need attendance recorded and will allow staff to cancel or postpone upcoming group sessions and to print rosters, which may be used by programs for recording attendance during a session. Screen A2 will list all sessions with complete attendance data; from this screen, program staff may review and revise session attendance information. On Screen A3 program staff may view the status of postponed sessions and past sessions that were canceled. Screens A4 through A7 are to record attendance for different types of groups: screen A4 will be used to record attendance at workshops with registered clients; screen A5 will be used to record attendance at open workshops for which client registration is not required; and screens A6 and A7 are similar to screens A4 and A5, but allow program staff to track attendance for additional workshop attendees when the workshop is intended for the client and another individual, such as his partner or child.

G1. Home Page



Welcome to Parents and Children Together

[Help](#)
[Contact Us](#)

MENU

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- [Manage Client](#)
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MESSAGES AND REMINDERS

Posting Date	Notice
12-19-2011	REMINDER - Record Attendance NOW!!
12-15-2011	New Fatherhood Group added Mon Nites
12-4-2011	Wed Baby & Me Group cancelled!!
11-21-2011	REMINDER - No Sessions on 11/24 & 11/25

Navigation
FROM:

TO: G2. Find a Client
G4. My Page - Appts & To Do's
A1. Managing Sessions - Upcoming Sessions & Attendance
W1. List of Workshops
RA Intake Form



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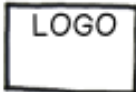
[Sign Out](#)

Find a Client

First Name:

Last Name:

Navigation
FROM: G1. Home Page
TO: G3. Find a Client Search Results



MENU

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[Sign Out](#)

Find a Client Search Results

Select Client	Last Name	First Name	MI	Nickname	Date of Birth
<input type="radio"/>	Adams	Lurch	X	The Big Man	10/12/1911
<input type="radio"/>	Adams	Gomez	Y		1/15/1945
<input type="radio"/>	Adams	Morticia	F		8/4/1950

[Return to Search \(G2\)](#)

[Open Client Summary](#)

Navigation
FROM: G2. Find a Client

TO: C1. Client Summary - Appts & Service Contact History
G2. Find a Client



User Name's Page

[Help](#)
[Contact Us](#)

[Review My User Information](#)

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[Appointments & To Do List](#) | [Clients](#) | [Referral Agencies](#)

◀ FEB 2008 ▶						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	

Appointments			
Date	Time	Client	Topic
2/16/12	1:30 pm	Rubble.Barney	Weekly meeting
2/16/12	10:00 am	Adams.Lurch	Workshop enrollment
2/19/12	11:00 am	Flintstone.Fred	Make-up Dads session

Print Today's Appointments

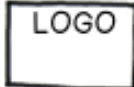
Add/Delete/Revise Appointment

To Do List		
Date	TASK	Done
2/20/12	Task 1	<input checked="" type="checkbox"/>
2/20/12	Task 2	<input type="checkbox"/>
2/24/12	Task 3	<input type="checkbox"/>

Print To Do List

Navigation
 FROM: G1. Home Page

TO: G5. My Page - Clients
 G6. My Page - Referral Agencies
 G7. User Information
 G8. Appointments



User Name's Page

[Help](#)
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[Review My User Information](#)

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[Appointments & To Do List](#) / [Clients](#) / [Referral Agencies](#)

Last Name	First Name.MI	Status
Last Name1	First Name1	Active
Last Name2	First Name 2	Active
Adams	Gomez (C1)	Active
Last Name4	First Name 4	Active
Last Name5	First Name 5	Inactive
Last Name6	First Name 6	Inactive

Click on name to go to Client Summary

Navigation

FROM: G4. My Page - Appts & ToDos
G6. My Page - Referral Agencies

TO: C1. Client Summary - Appts & Service Contact History
G4. My Page - Appts & ToDos
G6. My Page - Referral Agencies
G7. User Information

LOGO

User Name's Page

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Select Agency	Agency	Primary Service Provided	Phone	Contact	Email Address
<input type="radio"/>	AA	Substance Abuse	999-999-9999	Bill Smith	bsmith@abc.com
<input type="radio"/>	Planned Parenthood	Pregnancy Prevention	888-888-8888	Tanya West	twest@abc.com
<input type="radio"/>	Agency 3	Domestic Violence	777-777-7777	Sponge Bob	sbob@abc.com

[View Detailed Agency Info](#)

Navigation

FROM: G4. My Page - Appts & ToDos
G5. My Page - ClientsTO: G4. My Page - Appts & ToDos
G6. My Page - Clients
G7. User Information
G9. Agency Information

G7. User Information (view mode)



USER INFORMATION

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First Name:

Last Name:

Email:

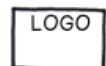
Phone:

User Name:

User Level:

[Change User Information](#)
[Reset Password](#)

G7. User Information (edit mode)



CHANGE USER INFORMATION

[Help](#)
[Contact Us](#)

First Name:

Last Name:

Email:

Phone:

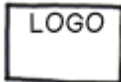
User Name:

User Level:

Navigation

FROM: G4. My Page - Appts & ToDos
G5. My Page - Clients
G6. My Page - Referral Agencies

TO: G4. My Page - Appts & ToDos
G5. My Page Clients
G6. My Page - Clients



Schedule Appointments

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Current Appointments

Client	Date	Time	Topic	
Rubble.Barney	2/16/12	1:30 pm	Weekly meeting	Delete
Adams.Lurch	2/16/12	10:00 am	Workshop enrollment	Delete
Flintstone.Fred	2/19/12	11:00 am	Make-up Dads session	Delete

Add New Appointment

Client	Date	Time	Topic	
Munster.Herman	2/27/12	2:00 pm	Weekly meeting	Add

Return without Saving

Save

Navigation
 FROM: G4. My Page - Appts & ToDo's
 C1. Client Summary - Appts & Service Contact History

 TO: G4. My Page - Appts & ToDo's
 C1. Client Summary - Appts & Service Contact History

G9. Agency Information (View mode)

AGENCY NAME

Location: Agency Street Address 1
Agency Street Address 2
Agency City, State, Zip

Name	Phone	Email
Dear Abby	999-999-9999	dabby@def.com
Homer Simpson	999-999-1111	hsimpson@def.com

Primary Service: Agency Primary Service

Additional Service(s): AgencyAddl Service 1
Agency Addl Service 2

Close

Edit

G9. Agency Information (Edit mode)

Update Agency Information

Agency Name:

Street Address 1:

Street Address 2:

City: State: Zip:

Key Personnel

First Name:	Last Name:	Phone:	Email:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Services Provided

Primary:

- Additional: Service 1
 (Mark All that Apply) Service 2
 Service 3

Return without Saving

Save

Navigation

FROM: G6. My Page - Referral Agencies
G9. Agency Information

TO: G6. My Page - Referral Agencies
G9. Agency Information

LOGO

Parents and Children Together

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Intake Form

Today's Date: mm/dd/yyyy

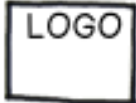
(All fields are required.)

1. Study ID
2. First Name Middle Name
Last Name
3. Date of Birth (mm) (dd) (yyyy)
4. Social Security Number
5. Did the client give consent to the Mathematica interviewer?
 Yes
 No
6. Is the client male or female?
 Male
 Female
7. Does the client have at least one living biological child under the age of 18?
 Yes
 No
8. Does the client live with any of his biological children all or most of the time?
 Yes
 No

9. If the client is randomly assigned to the group that receives program services...	All Available Services	Most Available Services	About Half	Some Available Services	No Services
a. How much do you think the client would participate in the PROGRAM'S NAME <u>parenting or relationship</u> services?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. How much do you think the client would participate in the PROGRAM'S NAME <u>employment</u> services?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. How much do you think the client would participate in the PROGRAM'S NAME <u>other</u> services?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Mathematica Interviewer ID Number
11. How was the client referred to the program? (Mark all that apply.)
 - Program's intake or outreach staff
 - Program's partner agency
 - Other community agency
 - Court order
 - Probation or parole officer
 - Word of mouth
 - Advertisement, flyer, or other public announcement
 - Client does not remember
 - Other (please specify):

04/06/2012



Parents and Children Together

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**Random Assignment Successful -
Assigned to Program (NonProgram) Group**

Last Name, First Name

Study ID

[Create Explanation Letter](#)

[View Intake Form](#)

Continue

LOGO

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Random Assignment Unsuccessful - Possible Duplicate Found

Study ID

DOB

SSN

All clients the new client matched:

Last Name	First Name	Study ID	DOB	SSN	RA Date	Reason Identified as Duplicate
Bradley	Milton	12345678	mm/dd/yyyy	xxx-xx-xxxx	mm/dd/yyyy	Last Name & DOB duplicate on last four
Seuss	Dr.	23456789	mm/dd/yyyy	xxx-xx-xxxx	mm/dd/yyyy	Digits of SSN and DOB
Sparrow	Jack	34567890	mm/dd/yyyy	xxx-xx-xxxx	mm/dd/yyyy	Duplicate on SSN

[Return to Intake Form](#)

Please contact study team member Bob Smith at 609-999-9999 if you are unable to resolve the duplicate issue.



Gomez Adams Client Summary

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[Appointments & Service Contact History](#) |
 [Address & Phone Info](#) |
 [Referral History](#) |
 [Registered Workshop Activity](#)

Nickname: Partner/Spouse Name:

Program Participation

Enrollment Date: End Date:

Temporary Hold: Reason no longer in program:

Appointments:

Date	Time	Topic
2/16/12	1:30 pm	Weekly meeting

Service Contact History:

Date of Contact	Where Service was Provided	Notes
2/16/12	Office	
2/9/12	Home Visit	

Navigation

FROM: G3. Find a Client Search Results
G5. My Page - Clients

TO: C2. Client Summary - Address & Phone Info
C3. Client Summary - Referral History
C4. Client Summary - Workshop Activity
C5. Update Client Info
C6. Service Contact Documentation
G8. Appointments
RPT2. Notes History



Gomez Adams Client Summary

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Client

Home Address:

Home Phone:
 Cell Phone:
 Work Phone:

Email: Twitter:

Facebook:

My Space:

Additional People

Name: Relationship:

Home Address:

Home Phone:
 Cell Phone:
 Work Phone:

Email: Twitter:

Facebook:

My Space:

Name: Relationship:

Home Address:

Home Phone:
 Cell Phone:
 Work Phone:

Email: Twitter:

Facebook:

My Space:

Name: Relationship:

Home Address:

Home Phone:
 Cell Phone:
 Work Phone:

Email: Twitter:

Facebook:

My Space:

Name: Relationship:

Home Address:

Home Phone:
 Cell Phone:
 Work Phone:

Email: Twitter:

Facebook:

My Space:

Navigation
 FROM: C1. Client Summary - Appointments & Service Contact History
 C3. Client Summary - Referral History
 C4. Client Summary - Workshop Activity
 C5. Update Client Info

TO: C1. Client Summary - Appointments & Service Contact History
 C3. Client Summary - Referral History
 C4. Client Summary - Workshop Activity
 C5. Update Client Info



Gomez Adams Client Summary

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- Appointments & Service Contact History
- Address & Phone Info
- Referral History**
- Registered Workshop Activity

Date of Contact	Agency	Notes
2/16/12	Care One	
2/9/12	Good Will	
2/2/12	AA	

- [View/Revise](#)
- [View/Revise](#)
- [View/Revise](#)

[Review All Notes](#)

[Add New Referral](#)

Navigation

FROM: C1. Client Summary - Appointments & Service Contact History
 C2. Client Summary - Address & Phone Info
 C4. Client Summary - Registered Workshop Activity
 C7. Referral Information

TO: C1. Client Summary - Appointments & Service Contact History
 C2. Client Summary - Address & Phone Info
 C4. Client Summary - Registered Workshop Activity
 C6. Service Contact Documentation
 C7. Referral Information
 RPT2. Notes History



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[Appointments & Service Contact History](#) |
 [Address & Phone Info](#) |
 [Referral History](#) |
 [Registered Workshop Activity](#)

Workshops Currently Attending

Select Group	Workshop	Group Name	Next Scheduled Session
<input type="radio"/>	Workshop #1	Mon Eve	3/5/12
<input type="radio"/>	Workshop #2	Sat morn	3/10/12

[Go To Group Assignment](#)

Past Workshops Attended

Workshop	Group Name
Fatherhood	Thur
Financial Responsibility	M/W

[Go to List of Workshops](#)

Navigation

FROM: C1. Client Summary - Appts & Service Contact History
 C2. Client Summary - Address & Phone Info
 C3. Client Summary - Referral History

TO: C1. Client Summary - Appts & Service Contact History
 C2. Client Summary - Address & Phone Info
 C3. Client Summary - Referral History
 W1. List of Workshops
 W7. Assign Client(s) to a Group



Update Client Information

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Client

First Name: <input type="text"/>	Nickname: <input type="text"/>
Middle Initial: <input type="text"/>	Partner/Spouse Name: <input type="text"/>
Last Name: <input type="text"/>	Home Phone: <input type="text"/>
Street 1: <input type="text"/>	Cell Phone: <input type="text"/>
Street 2: <input type="text"/>	Work Phone: <input type="text"/>
City: <input type="text"/> State: <input type="text" value="NJ"/> Zip: <input type="text"/>	Twitter: <input type="text"/>
Email: <input type="text"/>	Facebook: <input type="text"/>
My Space: <input type="text"/>	My Space: <input type="text"/>
Enrollment Date: <input type="text" value="RA Date"/>	End Date: <input type="text"/>
Temporary Hold: <input type="text"/>	Reason no longer in program: <input type="text" value="Dropdown menu"/>

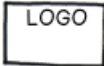
Additional People

First Name: <input type="text"/>	Relationship: <input type="text" value="dropdown"/>
Last Name: <input type="text"/>	Home Phone: <input type="text"/>
Street 1: <input type="text"/>	Cell Phone: <input type="text"/>
Street 2: <input type="text"/>	Work Phone: <input type="text"/>
City: <input type="text"/> State: <input type="text" value="NJ"/> Zip: <input type="text"/>	Twitter: <input type="text"/>
Email: <input type="text"/>	Facebook: <input type="text"/>
My Space: <input type="text"/>	My Space: <input type="text"/>

First Name: <input type="text"/>	Relationship: <input type="text" value="dropdown"/>
Last Name: <input type="text"/>	Home Phone: <input type="text"/>
Street 1: <input type="text"/>	Cell Phone: <input type="text"/>
Street 2: <input type="text"/>	Work Phone: <input type="text"/>
City: <input type="text"/> State: <input type="text" value="NJ"/> Zip: <input type="text"/>	Twitter: <input type="text"/>
Email: <input type="text"/>	Facebook: <input type="text"/>
My Space: <input type="text"/>	My Space: <input type="text"/>

First Name: <input type="text"/>	Relationship: <input type="text" value="dropdown"/>
Last Name: <input type="text"/>	Home Phone: <input type="text"/>
Street 1: <input type="text"/>	Cell Phone: <input type="text"/>
Street 2: <input type="text"/>	Work Phone: <input type="text"/>
City: <input type="text"/> State: <input type="text" value="NJ"/> Zip: <input type="text"/>	Twitter: <input type="text"/>
Email: <input type="text"/>	Facebook: <input type="text"/>
My Space: <input type="text"/>	My Space: <input type="text"/>

First Name: <input type="text"/>	Relationship: <input type="text" value="dropdown"/>
Last Name: <input type="text"/>	Home Phone: <input type="text"/>
Street 1: <input type="text"/>	Cell Phone: <input type="text"/>
Street 2: <input type="text"/>	Work Phone: <input type="text"/>
City: <input type="text"/> State: <input type="text" value="NJ"/> Zip: <input type="text"/>	Twitter: <input type="text"/>
Email: <input type="text"/>	Facebook: <input type="text"/>
My Space: <input type="text"/>	My Space: <input type="text"/>



Service Contact Documentation

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Client Name

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Date of contact:

Length of this service contact: (minutes)

5 - 14

15 - 29

30 - 44

45 - 59

60 or more

Was client present?

Yes

No

Who else participated in this service contact? (Mark All that Apply)

Father's Current Partner

Mother of Father's Child

Child

Other Service Provider

Other (Specify):

Content of this service contact: (Mark All that Apply)

Parenting

Strengthening Relationships

Economic Stability

Substance Abuse

Domestic Violence

Emergency Needs

Make-Up Session

Needs Assessment

Housing

Education (specify) _____

Legal

Other (specify) _____

Person providing this service contact:

Select:

Name 1

Name 2

Name 3

Where was this service contact provided?

Select:

Office

Telephone

Home visit

Community

Other

Was client referred to another agency during this service contact?

Yes

No

Specify:

Notes:

Navigation

FROM: C1. Client Summary - Appts & Service Contact History

TO: C1. Client Summary - Appts & Service Contact History

C7. Referral Information



Referral Information

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Client Name

Date of contact:

Referral provided: In writing
 Verbally

Agency referred to:
Partner 1
Partner 2
Partner 3
Outside Agency 1
Outside Agency 2
Outside Agency 3
Other (specify) _____

Type of referral service:
(Mark All that Apply)

- Parenting
- Strengthening Relationships
- Economic Stability
- Substance Abuse
- Domestic Violence
- Emergency Needs
- Needs Assessment
- Housing
- Legal
- Education

Notes:

MENU

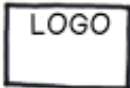
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Navigation

FROM: C3. Client Summary - Referral History
C6. Service Contact Documentation

TO: C1. Client Summary - Appts & Service Contact History
C7. Referral Information



List of Workshops

View only:

dropdown of Workshop Status ▼

- Active (default)
- All
- Inactive
- Unavailable

Workshop Name	Workshop Status
Getting Along	Active
How to Become a Millionaire	Active
How to say NO and mean it link (W4)	Active
Quality Time	Active
Becoming #1 Dad	Inactive
Until Death Do We Part	Unavailable

For workshop information & group listing, click Workshop Name.

[Add a Workshop \(W2\)](#)

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Navigation
 FROM: C4. Client Summary - Workshop Activity
 G1. Home Page
 TO: W2. Add or Revise a Workshop

LOGO

Add or Revise a Workshop

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Name:

Description:

Registration required: Yes
 No

Total hours to be offered:

Is this workshop intended for FATHERS (client)? Yes
 No

Intended other participants: (Mark all that apply)

- Father's current partner
- Mother of Father's noncustodial child
- Father's child
- Other *(Please specify)*

Category: (Mark all that apply)

- Parenting
- Fatherhood
- Healthy Relationship
- Economic Stability
- Other *(Please specify)*

Agency providing workshop: (Mark all that apply)

- Good Will
- YMCA
- Planned
- Remove workshop from list of available workshops

Facilitators

Available Facilitators

Select	Last Name	First Name
<input type="checkbox"/>	Last Name 1	First Name 1
<input type="checkbox"/>	Last Name 2	First Name 2
<input type="checkbox"/>	Last Name 3	First Name 3
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Add Selected Entries to List of Workshop Facilitators

Facilitators for this Workshop

Select	Last Name	First Name
<input type="checkbox"/>	Last Name 1	First Name 1
<input type="checkbox"/>	Last Name 2	First Name 2
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Remove Selected Entries from List of Workshop Facilitators

Return without saving (W1)

Save Workshop & Add a Group (W3)

Save Workshop (W4)

Navigation

FROM: W1. List of Workshops
W4. Workshop Information & Group Listing

TO: W1. List of Workshops
W3. Add or Revise a Group for a Workshop
W4. Workshop Information & Group Listing

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Add or Revise a Group for a Workshop

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How to say NO and mean it

Don't let your child wear you down

Registration Required: Total Hours to be Offered:

Group

Name:

of Sessions:

Agency Providing: Max number of participants: Check here if no limit

Group Status:

Meeting Day(s) & Time

Meeting Day(s): Mon Tues Wed Thur
(Mark All that Apply) Fri Sat Sun

Start Time: am pm

End Time: am pm

Location

Name:

Street:

City:

State: Zip Code:

Phone:

Dates

Start Date:

End Date:

No session on:

Facilitator(s)

-
-
-
-

Cancel Group (W5)

Return without saving to Workshop Info & Group Listing (W4)

Print Group Info (RPT1)

Save Group Info (W4)

Navigation

FROM: W2. Add or Revise a Workshop
W4. Workshop Information & Group Listing
W5. Cancel this Group

TO: W4. Workshop Information & Group Listing
W5. Cancel this Group
RPT1. Print Group Info

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Workshop Information & Group Listing

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How to say NO and mean it

Don't let your child wear you down.

Registration Required:

Total Hours to be Offered:

Agency Providing Service:

Select Group	Group Name	Meeting Day(s)	Start Time	Start Date	Location	Seats Left	Group Status
<input type="radio"/>	Tim's	Sat	9:00 pm	3/4/12	Help Center	10	Enrolling
<input type="radio"/>	Joan's	T/R	10:00 am	3/15/12	Rec Center	4	Enrolling
<input type="radio"/>	Mon Eve	M	7:00 pm	1/28/12	YMCA	6	Running
<input type="radio"/>	Sat Y	Sat	9:00 am	1/21/12	YMCA	Open	Finished
<input type="radio"/>	Al's	W	7:00 pm	1/7/12	YMCA	6	Cancelled

Navigation

FROM: W1. List of Workshops
W2. Add or Revise a Workshop
W3. Add or Revise a Group for a Workshop
W5. Cancel this Group
W7. Assign Client(s) to a Group

TO: W1. List of Workshops
W2. Add or Revise a Workshop
W3. Add or Revise a Group for a Workshop
W7. Assign Client(s) to a Group

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Cancel This Group

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<u>Workshop</u>	<u>Group Name</u>	<u>Meeting Day(s)</u>	<u>Start Time</u>	<u>Location</u>	<u>Start Date</u>
How to Say NO and Mean It	Mon	M	10:00 am	Rec Center	2/13/11

Reason for cancelling:

Select from choices below: ▼

- Insufficient enrollment
- Location not available
- Facilitator not available
- Other (*Please specify*)

Check here to reinstate this group

Return without Saving (W3)

Save & Return to Group Listing (W4)

Navigation
 FROM: W3. Add or Revise a Group for a Workshop
 TO: W3. Add or Revise a Group for a Workshop
 W4. Workshop Information & Group Listing

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Cancel or Postpone Session

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Workshop	Group Name	Session Date	Time	Location
How to Say NO and Mean It	Wed Morn	1/3/2012	10:00 - 11:00 am	Rec Center

Facilitator(s) _____

- Cancel Session
- Postpone Session
- To next available session date
 - Specify new date
 - Not Re-Scheduled Yet

Reason for Cancellation/Postponement:

Select Reason ▼

Facilitator ill/unavailable

Bad weather

Too few attendees

Holiday

Other

Please Specify:

- REINSTATE Cancelled or Postponed session (original session date is correct)

Navigation

FROM: A1. Managing Sessions - Upcoming Sessions & Attendance
 A4. Record Attendance from Roster
 A5. Record Attendance from Open Session
 A6. Record Attendance from Roster with PP
 A7. Record Attendance from Open Session with PP

TO: A1. Managing Sessions - Upcoming Sessions & Attendance
 A3. Managing Sessions - Postponed & Cancelled Sessions
 A4. Record Attendance from Roster
 A5. Record Attendance from Open Session
 A6. Record Attendance from Roster with PP
 A7. Record Attendance from Open Session with PP

LOGO

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Assign/Unassign Client(s) to a Group

<u>Workshop</u>	<u>Group Name</u>	<u>Start</u>	<u>Location</u>	<u>Start Date</u>
How to Say NO and Mean It	B	10:00 am	Rec Center	3/15/12

Seats Left:

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Eligible Clients

Select Client(s) below to Assign to this Group:

Select	Last Name	First Name.MI	Case Worker
<input type="checkbox"/>	Adams	Gomez.X	Wilma Flintstone
<input type="checkbox"/>	Brady	Mike	Case Worker 50
<input type="checkbox"/>	Mertz	Fred.Z	Case Worker 1
<input type="checkbox"/>	Munster	Herman	Betty Rubble
<input type="checkbox"/>	Ricardo	Ricky	George Jetson

Assign Selected Client(s) to this Group

Clients Assigned to this Group

Select Client below to Remove from this Group:

Select	Last Name	First Name.MI	Case Worker
<input type="radio"/>	Adams	Lurch.X	Case Worker 16
<input type="radio"/>	Bunker	Archie	Wilma Flintstone
<input type="radio"/>	Fonzarelli	Arthur.Y	Betty Rubble

Main reason client left group:

- No longer interested
- Assigned in error
- Sick/unavailable
- Incarcerated
- Work/Job Conflict
- Other (specify)_____

Remove Selected Client from this Group

Print Group Information

Finish & Return to previous Screen (W4, C4)

Navigation
 FROM: W4. Workshop Information & Group Listing
 C4. Client Summary - Workshop Activity
 TO: W4. Workshop Information & Group Listing
 C4. Client Summary - Workshop Activity



Managing Sessions

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-
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Upcoming Sessions & Attendance | Attendance Record Completed | Postponed & Cancelled Sessions

Upcoming Sessions

Select Roster	Workshop Name	Group Name	Session Date	Start Time	Location	Facilitator	Cancel or Postpone a Session
<input type="checkbox"/> <i>Select All</i>	How to say NO and mean it	Mon Eve	1/9/12	7:00 pm	YMCA	Young	<input type="radio"/>
<input type="checkbox"/>	How to say NO and mean it	Wed Morn	1/10/12	10:00 am	Rec Center	Smith	<input type="radio"/>
<input type="checkbox"/>	Quality Time	Sat Morn	1/5/12	9:00 am	Help Center	Munster	<input type="radio"/>
<input type="checkbox"/>	Getting Along	Thur Eve	1/4/12	7:00 pm	YMCA	Flintstone	<input type="radio"/>

Print Selected Rosters

Cancel/Postpone Session (W6)

...

Attendance

Attendance has not been recorded for the following sessions:

Select Session	Workshop Name	Group Name	Session Date	Start Time	Location	Facilitator	Attendance Status
<input type="radio"/>	How to say NO and mean it	Mon Eve	1/2/12	7:00 pm	YMCA	Young	Missing
<input type="radio"/>	How to say NO and mean it {Reg Reqd}	Thur Morn	1/3/12	10:00 am	Rec Center	Smith	Missing
<input type="radio"/>	Quality Time	Sat Morn	12/28/11	9:00 am	Help Center	Munster	Incomplete
<input type="radio"/>	Getting Along {No Reg Reqd}	Thur Eve	12/27/11	7:00 pm	YMCA	Flintstone	Missing

Record Attendance

Navigation

FROM: G1. Home Page
A2. Attendance Record Completed
A3. Postponed & Cancelled Sessions

TO: A2. Attendance Record Completed
A3. Postponed & Cancelled Sessions
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A5. Record Attendance from Open Session
A6. Record Attendance from Roster with Paired Participant
A7. Record Attendance from Open Session with Paired Participant
W6. Cancel or Postpone Session
RPT3 - Roster Printout



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Upcoming Sessions & Attendance | Attendance Record Completed | Postponed & Cancelled Sessions

Select Session	Workshop Name	Group Name	Session Date	Start Time	Location	Facilitator
<input type="radio"/>	How to say NO and mean it	Mon Eve	12/19/11	7:00 pm	YMCA	Young
<input type="radio"/>	How to say NO and mean it	Mon Eve	12/12/11	7:00 pm	YMCA	Young
<input type="radio"/>	How to say NO and mean it	Mon Eve	12/5/11	7:00 pm	YMCA	Young
<input type="radio"/>	How to say NO and mean it (Reg Reqd)	Wed Morn	12/21/11	10:00 am	Rec Center	Smith
<input type="radio"/>	Quality Time	Sat Morn	12/22/11	9:00 am	Help Center	Munster
<input type="radio"/>	Getting Along (No Reg Reqd)	Thur Eve	12/27/11	7:00 pm	YMCA	Flintstone

[Review/Revise Attendance](#)

- Navigation
- FROM: A1. Upcoming Sessions & Attendance
A3. Postponed & Cancelled Sessions
- TO: A1. Upcoming Sessions & Attendance
A3. Postponed & Cancelled Sessions
A4. Record Attendance from Roster
A5. Record Attendance from Open Session
A6. Record Attendance from Roster with Paired Participant
A7. Record Attendance from Open Session with Paired Participant

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Upcoming Sessions & Attendance | Attendance Record Completed | Postponed & Cancelled Sessions

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Postponed Sessions

Select Session	Workshop Name	Group Name	Original Session Date	New Session Date	Start Time	Location	Facilitator
<input type="radio"/>	How to say NO and mean it	Mon Eve	1/9/12	TBD	7:00 pm	YMCA	Young
<input type="radio"/>	How to say NO and mean it	Wed Morn	1/10/12	1/15/12	10:00 am	Rec Center	Smith
<input type="radio"/>	Quality Time	Sat Morn	1/5/12	1/8/12	9:00 am	Help Center	Munster
<input type="radio"/>	Getting Along	Thur Eve	1/4/12	3/14/12	7:00 pm	YMCA	Flintstone

Review/Revise Session

...

Cancelled Sessions

Select Session	Workshop Name	Group Name	Original Session Date	Start Time	Location	Facilitator
<input type="radio"/>	How to say NO and mean it	Mon Eve	1/9/12	7:00 pm	YMCA	Young
<input type="radio"/>	How to say NO and mean it	Wed Morn	1/10/12	10:00 am	Rec Center	Smith
<input type="radio"/>	Quality Time	Sat Morn	1/5/12	9:00 am	Help Center	Munster
<input type="radio"/>	Getting Along	Thur Eve	1/4/12	7:00 pm	YMCA	Flintstone

Review/Revise Session

Navigation

FROM: A1. Upcoming Sessions & Attendance
 A2. Attendance Record Completed

TO: A1. Upcoming Sessions & Attendance
 A2. Attendance Record Completed
 W6. Cancel or Postpone Session

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Record Attendance from Roster

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Workshop	Group Name	Session Date	Time	Location
How to Say NO and Mean It	Thur Morn	1/3/2012	10:00 - 11:00 am	Rec Center

Enter the following session info:

Location (if different from above):

Instruction Start Time*: am pm

Instruction EndTime*: am pm

Date of session (if different from above): / /

*Indicates required field

Facilitator(s)*

-
-
-
-

Client Attendance

Clients assigned to this session

Last Name	First Name.MI	Client Attended?	Reason for Absence (if known)
Adams	Gomez	<input type="radio"/> Yes <input type="radio"/> No	
Fester	Uncle	<input type="radio"/> Yes <input type="radio"/> No	
It	Cousin	<input type="radio"/> Yes <input type="radio"/> No	

Clients not assigned to this session

Select	Last Name	First Name.MI
<input type="checkbox"/>	Adams	Lurch.X
<input type="checkbox"/>	Bunker	Archie
<input type="checkbox"/>	Fonzarelli	Arthur.Y
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Other clients who attended this session

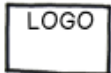
Last Name	First Name.MI	Client Attended?
		<input type="radio"/> Yes <input type="radio"/> Remove
		<input type="radio"/> Yes <input type="radio"/> Remove
		<input type="radio"/> Yes <input type="radio"/> Remove

Select clients who attended this session

Navigation

FROM: A1. Upcoming Sessions & Attendance
A2. Attendance Record Completed

TO: A1. Upcoming Sessions & Attendance
W6. Cancel or Postpone Session



Record Attendance from Open Session

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<u>Workshop</u>	<u>Group Name</u>	<u>Session Date</u>	<u>Time</u>	<u>Location</u>
How to Say NO and Mean It	Wed Morn	1/3/2012	10:00 - 11:00 am	Rec Center

Enter the following session info:

Location (if different from above):

Instruction Start Time*: am

pm

Instruction EndTime*: am

pm

Date of session (if different from above):

*Indicates required field

Facilitator(s)*

1.

2.

3.

4.

Client Attendance

Eligible clients

Select	Last Name	First Name.MI
<input type="checkbox"/>	Adams	Lurch.X
<input type="checkbox"/>	Bunker	Archie
<input type="checkbox"/>	Fonzarelli	Arthur.Y
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Select eligible clients who attended this session

Eligible clients who attended this session

Last Name	First Name.MI	Client Attended?
		<input type="radio"/> Yes <input type="radio"/> Remove
		<input type="radio"/> Yes <input type="radio"/> Remove
		<input type="radio"/> Yes <input type="radio"/> Remove

Navigation

FROM: A1. Upcoming Sessions & Attendance
A2. Attendance Record Completed

TO: A1. Upcoming Sessions & Attendance
W6. Cancel or Postpone Session



Record Attendance from Roster with Paired Participant

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Workshop	Group Name	Session Date	Time	Location
How to Say NO and Mean It	Thur Morn	1/3/2012	10:00 - 11:00 am	Rec Center

Enter the following session info:

Location (if different from above):

Instruction Start Time*: am pm

Instruction EndTime*: am pm

Date of session (if different from above):

Facilitator(s)*

-
-
-
-

*Indicates required field

Client Attendance

Clients Assigned to this Session

Last Name	First Name.MI	Client Attended?	Reason for Absence (if known)	Did client bring expected other participant?
Adams	Gomez	<input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input type="radio"/> No
Fester	Uncle	<input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input type="radio"/> No
It	Cousin	<input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input type="radio"/> No

Clients not assigned to this session

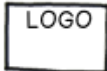
Select	Last Name	First Name.MI
<input type="checkbox"/>	Adams	Lurch.X
<input type="checkbox"/>	Bunker	Archie
<input type="checkbox"/>	Fonzarelli	Arthur.Y
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Select clients who attended this session

Other clients who attended this session

Last Name	First Name.MI	Client Attended?	Did client bring expected other participant?
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No

Navigation
 FROM: A1. Upcoming Sessions & Attendance
 A2. Attendance Record Completed
 TO: A1. Upcoming Sessions & Attendance
 W6. Cancel or Postpone Session



Record Attendance from Open Session with Paired Participant

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<u>Workshop</u>	<u>Group Name</u>	<u>Session Date</u>	<u>Time</u>	<u>Location</u>
How to Say NO and Mean It	Wed Morn	1/3/2012	10:00 - 11:00 am	Rec Center

Enter the following session info:

Location (if different from above):

Instruction Start Time*: am

pm

Instruction EndTime*: am

pm

Date of session (if different from above):

*Indicates required field

Facilitator(s)*

1. Last Name, First Name

2. Last Name, First Name

3. Last Name, First Name

4. Last Name, First Name

Client Attendance

Eligible clients

Select	Last Name	First Name.MI
<input type="checkbox"/>	Adams	Lurch
<input type="checkbox"/>	Bunker	Archie
<input type="checkbox"/>	Fonzarelli	Arthur
<input type="checkbox"/>	Last Name 4	First Name 4
<input type="checkbox"/>	Last Name 5	First Name 5

Select eligible clients who attended this session

Eligible clients who attended this session

Last Name	First Name.MI	Client Attended?	Did client bring expected other participant?
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No
		<input type="radio"/> Yes <input type="radio"/> Remove	<input type="radio"/> Yes <input type="radio"/> No

Navigation

FROM: A1. Upcoming Sessions & Attendance
A2. Attendance Record Completed

TO: A1. Upcoming Sessions & Attendance
W6. Cancel or Postpone Session