

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration OUTREACH AND ENROLLMENT SUPPLEMENTAL	FOR HRSA USE ONLY	
	Application Tracking Number	Grant Number

Grantee Information	
Grantee Name, City, State:	Application Tracking Number:

1. Progress toward O/E Projection			
Number of O/E workers who completed HHS training in previous quarter	Number of unique individuals assisted* by O/E workers in previous quarter	Cumulative total # of individuals assisted with O/E	Budget period projection of individuals to be assisted with O/E
Whole numbers only	Whole numbers only	Auto-calculate from past submissions.	Prepopulate with projection in application.

*Assisted ...

2. Coordination of Efforts
How have you coordinated your O/E efforts with other health centers and with other state or local efforts?
1500 characters (1/2 page)

3. Barriers
Describe any major O/E barriers you have encountered.
1500 characters (1/2 page)

4. Key Strategies and Lessons Learned
Describe key strategies and lessons learned that have contributed to the success of your O/E efforts.
1500 characters (1/2 page)