Welcome [], Grant number: [Budget period: [XXX] Report number: [XXX]]
REPORTING PERIOD: [] thro	ough [
enrolled and completed during	athorized Activities, how many people ng the reporting period? This is an unduplicated in any Authorized Activities during the reporting period.
a. Number enrolled	or data not collected
b. Number completed	or data not collected
how many people were:	orting for all of your grant's Authorized Activities,
2.a. Sex	MaleFemaledata not collected
2.b. Age	Under 18 years18 - 24 years25 - 34 years35 - 44 years45 - 54 years55 - 64 years65 years or olderdata not collected
2.c. Marital Status	Single, Never marriedSingle, Never marriedSingle, Never marriedSingle, Never marriedSingle, Never marriedSingle, Never married

Public reporting burden for this collection of information is estimated to average 48 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to ACF Reports Clearance Officer, Paperwork Reduction Project (OMB# 0970-0365), Administration for Children and Families, 370 L'Enfant Promenade, S.W., Washington, DC 20447. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control

	OLDC system
	Separated
	Divorced
	Widowed
	data not collected
2.d. Ethnicity	Hispanic Non-Hispanic data not collected
2.e. Race	American Indian/Alaskan Native Asian
	Black/African American
	Native Hawaiian/Other Pacific Islander
	White
	data not collected
2.f. Highest Educational Attainment	No degree or diploma earnedHigh school diploma/GEDVocational/Technical CertificationAssociate's degreeBachelor's degreeMaster's degree/Advance degreedata not collected
2.g. Employment Status	Full-time employmentPart-time employmentRetiredStudentDisabledLnemployed
	Unemployed

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OLDC Report Questions/infor	OLDC system
	data not collected
2.h. Income	Less than \$10,000
	\$10,000 - \$19,999
	\$20,000 - \$29,999
	\$30,000 - \$39,999
	\$40,000 - \$49,999
	\$50,000 - \$59,999
	\$60,000 - \$69,999
	\$70,000 - \$79,999
	More than \$80,000
	data not collected
	need to follow up on the information provided vide the name and contact information for the aformation.
Grant information provided by	/ :
Name:	
Title:	
Telephone number: ()	- E-mail address:

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Welcome [], Grant number: Budget period: [XXX] Report number: [XXX]	[]
REPORTING PERIOD: [] t	hrough []
Authorized Activity 1: Acti marriage	vities to promote marriage or sustain
1. Of those enrolled during this rewere:	eporting for Authorized Activity 1, how many people
1.a. Sex	Male Female
1.b. Age	Under 18 years
	18 - 24 years 25 - 34 years
	35 – 44 years
	45 – 54 years
	55 – 64 years
	65 years or older
	data not collected
1.c. Marital Status	Single, Never married
	Committed relationship (not married)
	Married
	Separated
	Divorced
	Widowed data not collected
1.d. Ethnicity	Hispanic
	Non-Hispanic
	data not collected

1.e. Race	American Indian/Alaskan NativeAsianBlack/African AmericanNative Hawaiian/Other Pacific IslanderWhite
	data not collected
1.f. Educational Attainment	No degree or diploma earnedHigh school diploma/GEDVocational/ Technical CertificationAssociate's degreeBachelor's degreeMaster's degree/Advance degree\data not collected
1.g. Employment Status	Full-time employmentPart-time employmentRetiredStudentDisabledUnemployeddata not collected
1.h. Income	Less than \$10,000 \$10,000 - \$19,999 \$20,000 - \$29,999 \$30,000 - \$39,999 \$40,000 - \$49,999 \$50,000 - \$59,999 \$60,000 - \$69,999 \$70,000 - \$79,999 More than \$80,000 data not collected

2	During this reporting period for Authoreople:	orized Activity 1, how many
	Enrolled in Authorized Activity 1? Completed Authorized Activity 1?	or data not collected data not collected
3.	During the reporting period, how many peach skill area through the following mode the number that enrolled and completed in each skill area enrolled and total completed. 3. a. Abuse prevention skills	des of service delivery? Please give
	i. Case management	People enrolled or data not collected
		People completed or data not collected
	ii. Curricula-based training	People enrolled or data not collected
		People completed or data not collected or did not conduct
	iii. Mentoring/Counseling	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
	iv. Peer group meetings	People enrolled or data not collected
		People completed or data not collected
		or did not conduct

3.b. Budgeting/financial skills

i.	Case management	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
ii.	Curricula-based training	People enrolled or data not collected
		People completed or data not collected or did not conduct
iii.	Mentoring/Counseling	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
iv.	Peer group meetings	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
<i>3.c.</i> Com	nunication skills	
i.	Case management	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
ii	. Curricula-based training	People enrolled or data not collected
		People completed or data not collected

	or did not conduct
iii. Mentoring/Counseling	People enrolled or data not collected
	People completed or data not collected
	or did not conduct
iv. Peer group meetings	People enrolled or data not collected
	People completed or data not collected
	or did not conduct
3.d. Conflict resolution skills	
i. Case management	People enrolled or data not collected
	People completed or data not collected
	or did not conduct
ii. Curricula-based training	People enrolled or data not collected
	People completed or data not collected
	or did not conduct
iii. Mentoring/Counseling	People enrolled or data not collected
	People completed or data not collected
	or did not conduct
iv. Peer group meetings	People enrolled or data not collected
	People completed or data not collected

or [did	not	conduct
------	-----	-----	---------

4. Of those who completed each skill area, how many showed improvement in each of the following?
a. Abuse prevention skills or data not collected or did not conduct
a.1 Number completing post-test (or denominator) or not applicable
b. Budgeting/financial skills or data not collected or did not conduct
b.1 Number completing post-test (or denominator) or not applicable
c. Communication skills or data not collected or did not conduct
c.1 Number completing post-test (or denominator) or not applicable
d. Conflict resolution skills or data not collected or did not conduct
d.1 Number completing post-test (or denominator) or not applicable

5.	Of those who completed, how many showed improvement in each of the following? Report 'attitudes towards marriage' for unmarried participants and 'commitment to marriage stability' for married participants.
a.	Attitudes towards marriage or Commitment to marriage stability or data not collected
a.1	Number completing post-test (or denominator) or not applicable
b. b.1	Relationship with spouse/fiancé/partner/co-parent? or data not collected Number completing post-test (or denominator) or not applicable
c.	Hopeful about their life improving in the future or data not collected or did not conduct
c.1	Number completing post-test (or denominator) or not applicable
6.	How did your program measure improvement in Healthy Marriage skills attitudes towards marriage/commitment to marriage stability, and relationship with the spouse/fiancé/partner/co-parent? Please describe your methods in the space below.
7.	Please attach an example copy of any instruments used to measure improvement in marriage skills, attitude or commitment improvement, and relationship improvement.

In case OFA or its contractors need to follow up on the information provided

in this submission, please provide the name and contact information for the person who is providing the information.		
Grant information provided by:		
Name:		
Title:		
Telephone number: () E-mail address:		

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Welcome [], Grant number: [Budget period: [XXX] Report number: [XXX]]			
REPORTING PERIOD: [] thro	ough []			
Authorized Activity 2: Activi	ties to promote responsible parenting			
1. Of those enrolled during this reporting for Authorized Activity 2, how many people were:				
1.a. Sex	MaleFemaledata not collected			
1.b. Age	Under 18 years			
	18 - 24 years			
	25 – 34 years			
	35 – 44 years			
	45 – 54 years			
	55 – 64 years			
	65 years or older			
data not collected				
1.c. Marital Status Single, Never married				
Committed relationship (not married				
	Married			
Separated				
	Divorced			
	Widowed			
	data not collected			
1.d. Ethnicity	Hismania			
5.0 <u> </u>	Hispanic			
	Non-Hispanic data not collected			
	data not conceted			
1.e. Race	American Indian/Alaskan Native			
	Asian			

	OLDC System
	Black/African American
	Native Hawaiian/Other Pacific Islander
	White
	data not collected
1.f. Educational Attainment	No degree or diploma earned
Attainment	High school diploma/GED
	Vocational/Technical Certification
	Associate's degree
	Bachelor's degree
	Master's degree/Advance degree
	data not collected
1.g. Employment Status	Full-time employment
	Part-time employment
	Retired
	Student
	Disabled
	Unemployed
	data not collected
1.h. Income	Less than \$10,000
	\$10,000 - \$19,999
	\$20,000 - \$29,999
	\$30,000 - \$39,999
	\$40,000 - \$49,999
	\$50,000 - \$59,999
	\$60,000 - \$69,999
	\$70,000 - \$79,999
	More than \$80,000
	data not collected

2. During this reporting period people:	for Authorized Activity 2, how many
Enrolled in Authorized Activity 2? Completed Authorized Activity 2?	or data not collected data not collected

3. During the reporting period, how many people enrolled and completed parenting activities through the following modes of service delivery? Please give the number that enrolled and completed for each service delivery method; this may be the same as the reported total enrolled and completed.

a.	Case management	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
b.	Curricula-based training	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
c.	Mediation	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
d.	Mentoring/life skills/coaching	People enrolled or data not collected
		People completed or data not collected
		or did not conduct
e.	Peer group meeting	People enrolled or data not collected
		People completed or data not collected
		or did not conduct

4. Of those who completed, how many showed improvement in each of the
following?
a. Amount of contact with children or data not collected or did not conduct
a.1 Number completing post-test (or denominator) or not applicable
b. Commitment to fatherhood or data not collected or did not conduct
b.1 Number completing post-test (or denominator) or not applicable
c. Hopeful about their life improving in the future or data not or did not conduct
c.1 Number completing post-test (or denominator) or not applicable
d. Knowledge of child support enforcement or data not collected
or did not conduct
d.1 Number completing post-test (or denominator) or not applicable
e. Parenting knowledge and skills or data not collected or did not conduct
e.1 Number completing post-test (or denominator) or not applicable
f. Relationship with their child[ren] or data not collected or did not conduct
f.1 Number completing post-test (or denominator) or not applicable

5. How did your program measure improvement in parenting skills, commitment to fatherhood, relationship with child[ren], contact with child[ren] and knowledge of child support enforcement? Please describe you methods in the space below.		
6.	Please attach an example copy of any instruments used to measure improvement in parenting skills, commitment to fatherhood, relationship, contact with child[ren]and knowledge of child support enforcement.	
in	case OFA or its contractors need to follow up on the information provided this submission, please provide the name and contact information for the rson who is providing the information.	
Gı	rant information provided by:	
Na	ame:	
Ti	tle:	
Te	elephone number: () - E-mail address:	

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Welcome [], Grant number: Budget period: [XXX] Report number: [XXX]	[]
REPORTING PERIOD: [] 1	through []
Authorized Activity 3: Actifathers improve their econo	vities to foster economic stability by helping omic status
1. Of those enrolled during this r were:	reporting for Authorized Activity 3, how many people
1.a. Sex	Male Female data not collected
1.b. Age	Under 18 years18 - 24 years25 - 34 years35 - 44 years45 - 54 years55 - 64 years65 years or olderdata not collected
1.c. Marital Status	Single, Never marriedCommitted relationship (not married)MarriedSeparatedDivorcedWidoweddata not collected
1.d. Ethnicity	HispanicNon-Hispanicdata not collected

	OLDC System		
1.e. Race	American Indian/Alaskan Native		
	Asian		
	Black/African American		
	Native Hawaiian/Other Pacific Islander		
	White		
	data not collected		
1.f. Educational	No degree or diploma earned		
Attainment	High school diploma/GED		
	Vocational/Technical school		
	Associate's degree		
	Bachelor's degree		
	Master's degree/Advance degree		
	data not collected		
1.g. Employment Status	Full-time employment		
	Part-time employment		
	Retired		
	Student		
	Disabled		
	Unemployed		
	data not collected		
1.h. Income	Less than \$10,000		
	\$10,000 - \$19,999		
	\$20,000 - \$29,999		
	\$30,000 - \$39,999		
	\$40,000 - \$49,999		
	\$50,000 - \$59,999		
	\$60,000 - \$69,999		
	\$70,000 - \$79,999		
	More than \$80,000		
	data not collected		

2. During this reporting period for Authorized Activity 3, how many people:			
Enrolled in Authorize	ed Activity 3?	or data not collected	
Completed Authorize	d Activity 3?	or data not collected	
3. During the reporting period, how many people enrolled and completed each skill area through the following modes of service delivery? Please give the number that enrolled and completed in each skill area; this may be the same as the reported total enrolled and total completed.			
3.a. Job F	Readiness		
i.	Case management	People enrolled or data not collected	
		People completed or data not collected	
		or did not conduct	
ii.	Curricula-based training	People enrolled or data not collected	
		People completed or data not collected or did not conduct	
iii.	Life skills/job coaching	People enrolled or data not collected	
		People completed or data not collected	
		or did not conduct	
iv.	Job readiness assessment (E.g. Online Work Readiness Assessment	People enrolled or data not collected	
	(OWRA))	People completed or data not collected	

			or did not conduct
	v.	Peer group meetings	People enrolled or data not collected
			People completed or data not collected
			or did not conduct
<i>3.b.</i>	Job S	earch	
	i.	Case management	People enrolled or data not collected
			People completed or data not collected
			or did not conduct
	ii.	Curricula-based training	People enrolled or data not collected
			People completed or data not collected
			or did not conduct
	iii.	Life skills/Job coaching	People enrolled or data not collected
			People completed or data not collected
			or did not conduct
	iv.	Peer group meetings	People enrolled or data not collected
			People completed or data not collected
			or \square did not conduct
3.c. Job Training			
i. (Case m	nanagement	People enrolled or data not collected

		People completed or data not collected	
		or did not conduct	
	ii. Curricula-based training	People enrolled or data not collected	
		People completed or data not collected	
		or did not conduct	
	iii. Life skills/Job coaching	People enrolled or data not collected	
		People completed or data not collected	
		or did not conduct	
	iv. Peer group meetings	People enrolled or data not collected	
		People completed or data not collected	
		or did not conduct	
4. Of those that completed Authorized Activity 3 during this reporting period, how many people:			
a.	Obtained full-time unsubsidized employment with wage increase	or data not collected	
b.	Obtained part-time unsubsidized employment with wage increase	or data not collected	
c.	Obtained new qualifications (e.g. industry specific certifications, GED)	or data not collected	
d.	With new jobs were still employed: i. 30 days later ii. 60 days later iii. 90 days later	or data not collected or data not collected or data not collected	

e.	Obtained subsidized employment	or data not collected	
f.	Showed commitment to family financial responsibility	or data not collected	
g.	Were hopeful about their life improving in the future	or data not collected	
skill	w did your program measure improvement in s, commitment towards financial responsibilities be your methods in the space below.		
imp	ase attach an example copy of any instrumer rovement in financial /employment skills, co ncial responsibility, and earnings.		
In case OFA or its contractors need to follow up on the information provided in this submission, please provide the name and contact information for the person who is providing the information.			
Grant information provided by:			
Name:			
Title: _			
Telephone number: () E-mail address:			

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