# Schedule D: Refugee Support Services (RSS) Set-Asides

ORR-6
OMB Control No. 0970-0036
Expires 02/28/2022

| | | | |
|---|---|---|---|
| **1. Program Name:** | | | |
| **2. Reporting Period:** | | **3. Fiscal Year:** | |
| **4. State/Grantee:** | | **5. Date:** | |

| **A. Type of the Participant** | **M** | **F** | **Total Year-To-Date Unduplicated** |
|---|---|---|---|
| 1. Eligible Refugee Students (RSI) | | | **0** |
| 2. Eligible Refugee Parents (RSI) | | | **0** |
| 3. Eligible Older Refugees (SOR) | | | **0** |
| 4. Eligible Youth Mentees (YM) | | | **0** |
| 5. Eligible Refugee Health Promotion Recipients (RHP) | | | **0** |

| **B. Primary Contracted Service Provider** | **M** | **F** | **Total Year-To-Date Unduplicated** |
|---|---|---|---|
| 1. School (Grade K-5) | | | **0** |
| 2. School (Grade 6-8) | | | **0** |
| 3. School (Grade 9-12) | | | **0** |
| 4. Resettlement Agency | | | **0** |
| 5. Area Agency on Aging | | | **0** |
| 6. Other Local Agency (provide type/name of agency) | | | **0** |
| 7. Other Local Agency (provide type/name of agency) | | | **0** |
| 8. Other Local Agency (provide type/name of agency) | | | **0** |

| **C. Completions by Type** | **M** | **F** | **Total Year-To-Date Unduplicated** |
|---|---|---|---|
| 1. Parent/Student Orientation (RSI) | | | **0** |
| 2. Grade Promotion (RSI) | | | **0** |
| 3. SSI (SOR) | | | **0** |
| 4. Citizenship (SOR) | | | **0** |
| 5. Other completion (provide type) | | | **0** |
| 6. Other completion (provide type) | | | **0** |
| 7. Other completion(provide type) | | | **0** |

**D. TRENDS**

1. Analyze and reflect on the data reported in sections A-C. Report overall observations in data trends and explain anomalies in data, including trends based on new program components and/or initiatives.