OMB# 0937-XXXX Expiration Date: X/XX/20XX

TPP Performance Measures for

FY2023

Tier 1 Supportive Services Item

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 is 0937-xxxx The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

FY2023 Connections to Supportive Services (Tier 1 only)

In the reporting period, how many TPP program participants were referred by grant proj	ject
staff to supportive services providers of the following services (Collect # of each):	

Reproductive Health Care	
Mental Health Services	
Substance Abuse Prevention/Treatment Services	
Primary Health Care	
Educational Services	
Vocational Education/Workforce Development	
Violence Prevention	
Housing	