

RAPP Indicators

GRANTEE NAME:		Reporting Period
GRANT NUMBER:		Budget Period

Program Activities	First Reporting Period	Second Reporting Period	Cumulative Fiscal Year
Number of participants enrolled:			
Number of participants enrolled identifying as "Male" excluding minor dependents:			
Number of Participants enrolled indentifying as "Female" excluding minor dependents:			
Number of Participants enrolled identifying as "Unspecified" or another gender identity excluding minor dependents:			
Acres of land provided for RAPP activities:			
Number of training hours provided in nutrition and/or food safety for personal consumption:			
Number of training hours provided in farming production techniques (e.g., agricultural produce selection, proper irrigation, harvesting, extending growing seasons, etc.)			
Amount of produce cultivated (lbs.):			
Gross sales of produce sold by all participants (\$):			
Number of participants and family members accessing healthy and nutritious foods through farming:			
Number of activities aimed towards increasing psychosocial development of refugees:			
Number of types of services received by the participants, not provided by RAPP grantee:			

Personal and Psychosocial Development Assessment

	At Enrollment	End-of-Year Assessment
Number of Individuals Assessed:		

Using the scoring scale below, provide a mean assessment score of all clients enrolled in RAPP.

1 - Not At All - Client cannot complete activities in this area without assistance from the grantee.

2 - Sometimes - Clients can complete some activities on their own, but still require assistance from the grantee for some tasks.

3 - Most Of The Time - Clients are able to complete most tasks in this area on their own, but may request assistance from the grantee.

4 - All The Time - Clients are able to complete all activities in this area without any assistance from the grantee.

	At Enrollment	End-of-Year Assessment
Client has access to healthy food:		
Client understands what a healthy diet is:		
Clients are engaged in physically activity:		
Client has sufficient income to cover needs (e.g., housing, food, transportation, etc.)		
Client is engaged in the community:		
Client knows how to find answers for questions about nutrition and health:		
Client knows how to find answers for questions about gardening/farming (e.g., leasing land, zoning laws, pesticides, organic production, etc.):		
Client can navigate relevant systems (e.g., local governments, business development process, accessing benefits, etc.) without grantee intervention:		

Logic Model Outputs Progress	Semi-Annual Results	
	Months 1-6	Months 7-12
Please list all planned Outputs from the Logic Model in the following spaces. Add more spaces as necessary.	Identify progress towards each Output for Months 1-6	Identify progress towards each Output for Months 7-12

Logic Model Outcomes Progress	Semi-Annual Results	
	Months 1-6	Months 7-12
Please list all planned Outcomes from the Logic Model in the following spaces. Add more spaces as necessary.	Identify progress towards each Outcomes for Months 1-6	Identify progress towards each Outcomes for Months 7-12

OMB Control Number: 0970-0490; Expiration date: 1/31/2023

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Cumulative Project Period

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	Cumulative Fiscal Year	Cumulative Project Period
hs 7-12		
owards each Output ths 7-12.	<i>Describe progress towards Outputs for the current fiscal year.</i>	<i>Describe progress towards Outputs for the project period.</i>

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