

## Ethnic Community Self-Help (ECSH) Program Data Indicators

1. Recipient Name:			
2. Grant Number:			
3. Reporting Period End Date:			
<b>DIRECT SERVICES</b>			
<b>Program Activities</b>	<b>First Reporting Period</b>	<b>Second Reporting Period</b>	
4. Number of New Enrollments			
5. Number of Clients Served			
6. Number of Clients Served According to Sex			
6a. Female			
6b. Male			
7. Number of Clients Served According to Status			
7a. Refugee			
7b. Asylee			
7c. Cuban/Haitian Entrants			
7d. Special Immigrants Visa Holders			
7e. Afghan Humanitarian Parolees			
7f. Amerasians			
7g. Victims of Human Trafficking			
7h. Ukraine Humanitarian Parolees			
8. Types of Services Provided	<b>First Reporting Period</b>	<b>Second Reporting Period</b>	
8a. Navigation Services			
8b. Cultural/community orientation			
8c. Health-related services			
8d. Home management services			
8e. Transportation			

8f. Translation and interpretation services			
8g. Case management services			
8h. English language training			
8i. Employability services			
8j. Academic enrichment/college preparation			
8k. Emotional wellness services			
8l. Referral services			
8m. Citizenship preparation/civic engagement			
8n. Other (list):			
<b>ORGANIZATIONAL DEVELOPMENT</b>			
<b>Program Activities</b>	<b>First Reporting Period</b>	<b>Second Reporting Period</b>	
9. Number of New Partnerships Developed			
10. Type of New Partnerships Developed			
10a. Educational organization			
10b. Local/state government entity			
10c. Medical service provider			
10d. Legal service provider			
10e. Faith-based group			
10f. Other (list)			
11. Types of Training Provided to Staff	<b>First Reporting Period</b>	<b>Second Reporting Period</b>	
11a. Case management			
11b. Case documentation			
11c. Interpretation			
11d. Cultural sensitivity and awareness			
11e. Self-care			
11f. Cultural orientation provision			

11g. Public benefits			
11h. Health services and systems			
11i. Non-profit management			
11j. Other (list)			
CIVIC ENGAGEMENT			
12. Types of Community Engagement Activities Conducted (list)	First Reporting Period	Second Reporting Period	
LOGIC MODEL OUTPUTS & OUTCOMES			
13. Logic Model Outputs Progress	Semi-Annual Results		
	First Reporting Period	Second Reporting Period	
Please list all planned <b>Outputs</b> 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.	
14. Logic Model Outcomes Progress	Semi-Annual Results		
	First Reporting Period	Second Reporting Period	
Please list all planned <b>Outcomes</b> 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.	


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In immediate response to priorities of the current administration, this form has been updated with the following changes prior to approval by the Office of Management and Budget (OMB), as required by the Paperwork Reduction Act (PRA) of 1995 (44. USC. 3501 et seq.). The PRA requires that agencies obtain OMB approval before requesting information from the public, and OMB review and approval for most changes to an approved information. ACF is working to process these changes through OMB to come into compliance with the PRA but has implemented changes to the OMB-approved form to ensure compliance with the following Executive Orders: Executive Order(s) 14168 and/or 14151, 14173, 14224. Other than these changes, this form is approved under OMB #: 0970-0490.

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