	RAPP Indicators		
GRANTEE NAME: GRANT NUMBER:			Reporting Perio Budget Period
Program Activities	First Reporting Period	Second Reporting Period	Cumulative Fisc Year
Number of participants enrolled:			
Number of male participants enrolled, excluding minor dependents			
Number of female participants enrolled, 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 Develo	oment Assessme	nt	
	At Enrollment	End-of-Year Assessment	
Number of Individuals Asessed:			1

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

- **1 Not At All** Client cannot complete activites in this area without assistance from the grantee.
- **2 Sometimes** Clients can complete some activities on their own, but still require assistance from the grar tasks.
- **3 Most Of The Time** Clients are able to complete most tasks in this area on their own, but may request o assistance from the grantee.
- 4 All The Time Clients are able to complete all activities in this area without any assistance from the grar

	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	Montl	
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 to for Mon	

Landa Madal O dan ara Barana	Semi-Annual Results	
Logic Model Outcomes Progress	Months 1-6	Montl
	Identify progress towards each Outcomes	Identify progre
	for Months 1-6	Outcomes for
Please list all planned Outcomes from the Logic Model in the following spaces. Add more spaces as necessary.		

OMB Control Number: 0970-0490; Expiration date: 3/31/2026

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information program to understand the design and effectiveness of the program and to inform technical assistant collection of information is estimated to average 2.3 hours per grantee, including the time for reviewing instanceded, and reviewing the collection of information. This collection of information is required to retain a bramended). An agency may not conduct or sponsor, and a person is not required to respond to, a collection the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB number any comments on this collection of information, please contact Yimeem Vu at Yimeem.Vu@acf.hhs.gov

In immediate response to priorities of the current administration, this form has been updated with the Office of Management and Budget (OMB), as required by the Paperwork Reduction Act (PRA) c requires that agencies obtain OMB approval before requesting information from the public, and O an approved information. ACF is working to process these changes through OMB to come into come changes to the OMB-approved form to ensure compliance with the following Executive Orders: Execu

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hs 7-12	Cumulative Fiscal Year	Cumulative Project Period
ss towards each r Months 7-12.	Describe progress towards each Outcome for the current fiscal year.	Describe progress towards each Outcome for the project period.

rmation collection, ACF is gathering data on your ce needs. Public reporting burden for this structions, gathering and maintaining the data enefit (Pub. L. 105-285, section 680(b) as of information subject to the requirements of umber for this request is 0970-0490. If you have

of the following changes prior to approval by of 1995 (44. USC. 3501 et seq.). The PRA MB review and approval for most changes to opliance with the PRA but has implemented ecutive Order(s) 14168 and/or 14151, 14173,