



Work Plans and Reporting
Youth Prevention
School-Based & Community-Based

Reminders:

- **NO** Pre-Testing and Post-Testing in 2007 Evaluation.
- No more “Performance Measures”
- Summary reports have changed.

STRATEGY:

**School-Based Youth
Prevention**

**Community-Based
Youth Prevention**

Youth Prevention Rationale

- Research indicates that certain youth prevention curricula are effective when implemented with full fidelity
- Implementing these programs with full fidelity is challenging in the real world environment.
- The evaluation component for this strategy assesses the extent that grantees are able to implement prevention curricula with fidelity. Teacher and youth surveys will provide program reach data. Youth surveys will provide target demographics and local data regarding youth tobacco use behaviors.

OTPF Grant Management Information System School-based Youth Prevention: New Work Plan

Cancel Save and Close Save and Submit

Please provide a short unique title for this programmatic activity. This title will better enable you to report on it.

Name the work plan so that you'll be able to remember it later. Names cannot be changed later.

Who besides the RE Coordinator is responsible for reporting on this Work Plan entry?

Grantee GT1

Enter the program cost to be funded by OTPF grant funds.

Enter the program cost to be funded by matching funds.

Enter the proposed Start Date for this programmatic activity.

Enter date in M/D/YYYY format.

Enter the proposed End Date for this programmatic activity.

Enter date in M/D/YYYY format.

Which youth prevention curriculum will you implement? (choose only one)

Select one...

Select one...

- Life Skills Training (3rd-4th Grade Curriculum, 8 sessions)
- Life Skills Training (4th-5th Grade Curriculum, 8 sessions)
- Life Skills Training (5th-6th Grade Curriculum, 8 sessions)
- Life Skills Training (Middle School Curriculum: 6th-9th Grade: Yr1, 15 sessions; Yr 2, 10 sessions, Yr 3, 5 sessions)
- Project Alert (6th-8th Grade, 11 sessions)
- Project T.N.T. (5th-8th Grade, 10 sessions)
- S.T.A.M.P. (5th-8th Grade, 4 sessions)
- In wh Word of Mouth (4th Grade Curriculum, 4 sessions)
- Word of Mouth (5th Grade Curriculum, 4 sessions)
- Word of Mouth (6th Grade Curriculum, 4 sessions)
- Word of Mouth (7th Grade Curriculum, 4 sessions)
- In wh Word of Mouth (8th Grade Curriculum, 4 sessions)

Same questions in each work plan – who can report on this work plan? What is the budget for this strategy? Start and end dates?

WORK PLAN IN G-Wiz



You will be able to select from the list of OTPF-approved programs. Only choose one curriculum for each work plan

Which youth prevention curriculum will you implement? (choose only one)

Project T.N.T. (5th-8th Grade, 10 sessions)

How many do you propose reaching in the 5th Grade?

How many do you propose reaching in the 6th Grade?

How many do you propose reaching in the 7th Grade?

How many do you propose reaching in the 8th Grade?

Are you implementing this program in a public school district or in a private/community/charter school?

- Public School
- Private/community/charter School

In which county will you be implementing this curriculum? (Choose only one)

In which school district will you implement this curriculum? (Choose only one)

Select the schools where you plan to implement the curriculum. (Select all that apply)

Have all the persons who will be facilitating this curriculum been trained by a certified trainer of tobacco use and prevention?

- Yes
- No

Based on the curriculum you selected to implement (see above), do you intend to deliver the required number of sessions?

- Yes
- No

Are you substantially modifying the curriculum content to be culturally appropriate for a specific target audience?

- Yes
- No

Are you substantially modifying the curriculum content to address tobacco-related concepts not addressed in the core curriculum?

- Yes
- No

Are all the schools committed to implementing this curriculum with the recommended number of sessions and session length? (Check box if Yes)

- Yes
- No

To fulfill your responsibilities as a grantee you are responsible for submitting data to OTREC. Please check the box to confirm that you will submit this information in a timely fashion.

- Yes
- No

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Once you choose a program, the appropriate grades will show up below. Enter the targeted number of students.

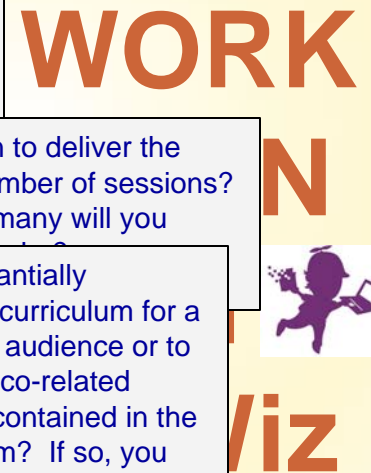
This drop-down box will allow you to select any county in Ohio. You can only choose one county, and one school district, for each work plan. However, you will be able to choose

Have all of your facilitators been trained by a certified trainer? If not, what plan for training?

Do you plan to deliver the required number of sessions? If not, how many will you

Are you substantially modifying the curriculum for a specific target audience or to address tobacco-related concepts not contained in the core curriculum? If so, you will need to describe how you will do this.

Are the schools committed to implementing this curriculum with the recommended number of sessions and session length? Confirms your understanding that you are responsible for submitting data to OTREC



Community-based Youth Prevention: New Plan

Please provide a short unique title for this programmatic activity. This title will better enable you to report on the activity in the future.

Name the work plan so that you'll be able to remember it later. Names cannot be changed later.

Who besides the RE Coordinator is responsible for reporting on this Work Plan entry?

Enter the program cost to be funded by OTPF.

Enter the program cost to be funded by matching funds.

Enter the proposed Start Date for the programmatic activity.

Enter date in M/D/YYYY format.

Enter the proposed End Date for the programmatic activity.

Enter date in M/D/YYYY format.

Which youth prevention curriculum will you implement? (choose only one)

Select one...

Select one...

- Life Skills Training (3rd-4th Grade Curriculum, 8 sessions)
- Life Skills Training (4th-5th Grade Curriculum, 8 sessions)
- Life Skills Training (5th-6th Grade Curriculum, 8 sessions)
- Life Skills Training (Middle School Curriculum: 6th-9th Grade: Yr1, 15 sessions; Yr 2, 10 sessions, Yr 3, 5 sessions)
- Project Alert (6th-8th Grade, 11 sessions)
- Project T.N.T. (5th-8th Grade, 10 sessions)
- S.T.A.M.P. (5th-8th Grade, 4 sessions)
- Word of Mouth (4th Grade Curriculum, 4 sessions)
- Word of Mouth (5th Grade Curriculum, 4 sessions)
- Word of Mouth (6th Grade Curriculum, 4 sessions)
- Word of Mouth (7th Grade Curriculum, 4 sessions)
- Word of Mouth (8th Grade Curriculum, 4 sessions)

Same questions in each work plan – who can report on this work plan? What is the budget for this strategy? Start and end dates?

You will be able to select from the list of OTPF-approved programs. Only choose one curriculum for each work plan

WORK PLAN IN G-Wiz



Have all the persons who will be facilitating this curriculum been trained by a certified trainer of the program?

- Yes
- No

Have all of your facilitators been trained by a certified trainer? If not, what is your plan for training?

Do you intend to deliver the required number of sessions?

- Yes
- No

Do you plan to deliver the required number of sessions? If not, how many will you deliver and why?

Are you substantially modifying the curriculum content to be culturally appropriate for a specific target audience?

- Yes
- No

Are you substantially modifying the curriculum content to address tobacco-related concepts not addressed by the core curriculum?

- Yes
- No

Are you substantially modifying the curriculum for a specific target audience or to address tobacco-related concepts not contained in the core curriculum? If so, you will need to describe how you will do this.

Are all the community-based sites committed to implementing this curriculum with the recommended number of sessions and session length?

- Yes
- No

Are the schools committed to implementing the core curriculum with the recommended number of sessions and session length? If not, how will you advocate for implementing the recommended number of sessions?

To fulfill your responsibilities as a grantee you are responsible for submitting data (Youth Survey, Fidelity Checklist, Teacher Report) to OTREC. Please check the box to confirm that you will submit this information in a timely fashion.

- Yes
- No

Confirms your understanding that you are responsible for submitting data to OTREC

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Data Collection Protocol

- **Data Collection Protocol**
 - Applies to both school-based and community-based programs
 - **Part 1: Youth Prevention Evaluation Materials**
 - **Part 2: Preparation & Distribution of Youth Prevention Evaluation Packet**
 - **Part 3: Implementation of Youth Prevention Evaluation Tools AND Instructions for Facilitators**
 - **Part 4: Data Entry and Reporting**

Three components to Youth Prevention Evaluation

■ Curriculum fidelity

- How well do facilitators keep to published curriculum
- What can and can't they do
- Year of exploration – stress that this is not an evaluation of the facilitator

■ Program accountability

- Assesses intervention dosage, program satisfaction.

■ Program reach

- How many you reach (# of surveys completed) and who (demographics)?

Part 1: Youth Prevention Evaluation Materials

Facilitator Fidelity Checklists: Curriculum and Grade Specific

OTPF LifeSkills Training: Middle School Year 1 (6th/7th) Facilitator Fidelity Checklist

Grantee Name

Class ID -

Subgrantee Name

Facilitator First Name Facilitator Last Name

Facilitator Sex
 Male
 Female

Facilitator Phone () -

Facilitator E-mail

School District School

Teacher Grade Period

Instructions: Please complete the appropriate section after completion of each session. Indicate the date the session was completed, how many minutes were spent on covering that session, and indicate which of the session objectives were completed. If any session objectives were not completed, please explain why. In the notes section at the end of the survey, please include any comments you have about any session including changes you may have made to the curriculum materials.

SESSION	DATE COMPLETED TIME TO COMPLETE (MIN)		TOPICS/ACTIVITIES COVERED		CURRICULUM ATTAINMENT
			Yes	No	
Session 1: Self-Image and Self-Improvement	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Ground Rules <input type="checkbox"/> How I See Myself (WS1) <input type="checkbox"/> Taking Stock (WS2) <input type="checkbox"/> Setting and Achieving Personal Goals <input type="checkbox"/> Self Improvement Project <input type="checkbox"/> Recording My Progress (WS3) <input type="checkbox"/> Session Summary



47895



Part 1: Youth Prevention Evaluation Materials

OTPF Teacher Reporting Form

OTPF TEACHER REPORTING FORM Draft **Ohio Tobacco Prevention FOUNDATION** A Healthier State for All

Class ID: -

Facilitator First Name: Facilitator Last Name:

CLASSROOM TEACHER: PLEASE COMPLETE THE INFORMATION BELOW.

School District Name:

School Name:

Teacher Last Name: Class Period:

Teacher E-mail Address: (ex. jjones@standohio.org)

1. How many students are enrolled in this class? students

2. How many classroom sessions of the tobacco prevention program were presented to this class? sessions

3. On average, about how many minutes was each classroom session? minutes

4. How many students are in each grade in this class?
 If there are no students in a particular grade, please write "00" in the boxes at the right.

4th graders 7th graders

Part 1: Youth Prevention Evaluation Materials

OTPF Youth Prevention Survey

OTPF YOUTH PREVENTION SURVEY
(4th Grade and Up)

Ohio Tobacco Prevention
A Healthier State for All

This survey will ask you a few questions about who you are and what you do. **DO NOT WRITE YOUR NAME ON THIS SURVEY.** The answers you give will be kept private and no one will know how you answer the questions. Answering the questions on this survey will not impact your grades in any of your classes. If you are not comfortable answering a question, just leave it blank.

Today's Date: / /

<p>PART 1: ABOUT YOU</p> <p>1. Are you a boy or a girl? <input type="radio"/> Boy <input type="radio"/> Girl</p> <p>2. How old are you? <input type="radio"/> 8 or younger <input type="radio"/> 12 years old <input type="radio"/> 9 years old <input type="radio"/> 13 years old <input type="radio"/> 10 years old <input type="radio"/> 14 years old <input type="radio"/> 11 years old <input type="radio"/> 15 or older</p> <p>3. What grade are you in? <input type="radio"/> 4th grade <input type="radio"/> 7th grade <input type="radio"/> 5th grade <input type="radio"/> 8th grade <input type="radio"/> 6th grade <input type="radio"/> Other _____</p> <p>4. Which of these best describes you? <input type="radio"/> White (not Hispanic) <input type="radio"/> Black/African-American (not Hispanic) <input type="radio"/> Hispanic <input type="radio"/> Asian or Pacific Islander <input type="radio"/> Native American or Alaskan Native <input type="radio"/> Other, please specify: _____</p> <p>5. Do you live with anybody who smokes, including cigarettes, cigars or little cigars (e.g., Black & Milds), or a pipe? <input type="radio"/> Yes <input type="radio"/> No</p> <p>6. Has anyone <u>ever</u> offered you a cigarette, little cigar, or chew? <input type="radio"/> Yes <input type="radio"/> No</p>	<p>PART 2: TOBACCO USE</p> <p>7. Have you ever tried <u>cigarette</u> smoking even one or two puffs? <input type="radio"/> Yes <input type="radio"/> No</p> <p>8. During the past 30 days, on how many days did you smoke cigarettes? <input type="radio"/> 0 days <input type="radio"/> 10 to 19 days <input type="radio"/> 1 or 2 days <input type="radio"/> 20 to 29 days <input type="radio"/> 3 to 5 days <input type="radio"/> all 30 days <input type="radio"/> 6 to 9 days</p> <p>9. Have you ever tried <u>cigars, little cigars, or cigarillos</u> (e.g. Black & Milds), even one or two puffs? <input type="radio"/> Yes <input type="radio"/> No</p> <p>10. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars? <input type="radio"/> 0 days <input type="radio"/> 10 to 19 days <input type="radio"/> 1 or 2 days <input type="radio"/> 20 to 29 days <input type="radio"/> 3 to 5 days <input type="radio"/> all 30 days <input type="radio"/> 6 to 9 days</p> <p>11. Have you ever used <u>chewing tobacco, snuff, or dip</u>, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen? <input type="radio"/> Yes <input type="radio"/> No</p> <p>12. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip? <input type="radio"/> 0 days <input type="radio"/> 10 to 19 days <input type="radio"/> 1 or 2 days <input type="radio"/> 20 to 29 days <input type="radio"/> 3 to 5 days <input type="radio"/> all 30 days <input type="radio"/> 6 to 9 days</p> <p style="text-align: right;">Thank you for completing this survey!</p>
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Part 1: Youth Prevention Evaluation Materials

Surveys and Resource Materials

All documents will be downloadable at:

www.otrec.org

Website will go live January 1, 2007.

We'll keep you updated!

Part 2: Preparation & Distribution of Youth Prevention Evaluation Packets

- Materials for each classroom must remain together – recommend a packet system.
- Recommended process – you may have your own system for distributing evaluation tools.
- However, you must use the online evaluation data tracking system OTREC-DM.

Part 2: Preparation & Distribution of Youth Prevention Eval Packet

- Each packet contains:
 - Youth Prevention Evaluation Implementation Instructions
 - One copy of OTPF Teacher Reporting Form
 - One copy of program & grade specific Fidelity Checklist
 - Enough OTPF Youth Prevention Surveys for each youth participant
 - Info label on front
- RE Coordinator responsible for preparing all copies of documents

OTPF YOUTH PREVENTION SURVEY (4th Grade and Up) Ohio Tobacco Prevention

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This survey will ask you a few questions about who you are and what you do. DO NOT WRITE YOUR NAME ON THIS SURVEY. The answers you give will be kept private and no one will know how you answer the questions. Answering the questions on this survey will not affect your grades in any of your classes. If you are not comfortable answering a question, just leave it blank.

Today's Date: [] / [] / []

PART 1: ABOUT YOU

1. Are you a boy or a girl?
 Boy Girl

2. How old are you?
 8 to 9 days
 10 to 19 days
 20 to 29 days
 all 30 days

3. What grade are you in?
 4th grade 7th grade
 5th grade 8th grade
 6th grade Other _____

4. Which of these best describes you?
 White (not Hispanic)
 Black/African-American (not Hispanic)
 Hispanic
 Asian or Pacific Islander
 Native American or Alaskan Native
 Other, please specify: _____

5. Do you live with anybody who smokes, including cigarettes, cigars or little cigars (e.g. Black & Milds), or a pipe?
 Yes No

6. Has anyone ever offered you a cigarette, little cigar, or chew?
 Yes No

PART 2: TOBACCO USE

7. Have you ever tried cigarette smoking even one or two puffs?
 Yes No

8. During the past 30 days, on how many days did you smoke cigarettes?
 0 days 10 to 19 days
 1 or 2 days 20 to 29 days
 3 to 5 days all 30 days
 6 to 9 days

9. Have you ever tried cigars, little cigars, or cigarillos (e.g. Black & Milds), even one or two puffs?
 Yes No

10. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?
 0 days 10 to 19 days
 1 or 2 days 20 to 29 days
 3 to 5 days all 30 days
 6 to 9 days

11. Have you ever used chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
 Yes No

12. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip?
 0 days 10 to 19 days
 1 or 2 days 20 to 29 days
 3 to 5 days all 30 days
 6 to 9 days

Thank you for completing this survey!



BE CAREFUL!
 To be read by OTREC's scanner, each copy must have the four corner boxes fully visible.

AND the form ID and barcode box must be clear and present on each copy.

All youth prevention forms are created on a scannable form.

Reproducible youth prevention tools are included in your manual. You may also download the .pdf from the otrec.org website.

Part 2: Preparation & Distribution of Youth Prevention Eval Packet

- Before you can distribute the packets, they must be “registered” into the online evaluation data tracking system (OTREC-DM)
 - Secure system housed at CASE; accessible from the internet.
- Must have the following information to start:
 - Grade-specific curriculum, school district, school, grade, classroom teacher and facilitator name.

OTREC Evaluation Data Tracking System – Getting a Class ID

- Assigns a unique Class ID Number
- ID required to link data from fidelity, teacher reporting and student data.
- Brief OTREC-DM demo.

The screenshot displays two overlapping windows from the OTREC system. The top window, titled 'Grantee Information', shows the text 'Agency Case Testing 1'. The bottom window, titled 'Edit CLASS_ASSIGNMENTS', contains several input fields: 'District' (a dropdown menu with 'Select District' selected), 'School' (a dropdown menu), 'Program' (a dropdown menu with 'Alert' selected), 'Grade' (a dropdown menu with '4' selected), 'Class Period' (a text input field), 'Teacher' (a text input field), 'Facilitator' (a text input field), and 'Status' (a label with the value 'Incomplete'). There are 'Cancel' and 'Create' buttons in the top right corner of the 'Edit CLASS_ASSIGNMENTS' window.

OTREC Online Data Tracking System: Tracking Your Prevention Classes

- Once you register the class, you'll be able to track it online.
- Ability to sort list of classes by any underlined column header

CLASS_ASSIGNMENT **HERE'S THE ID FOR THE PACKET** Create

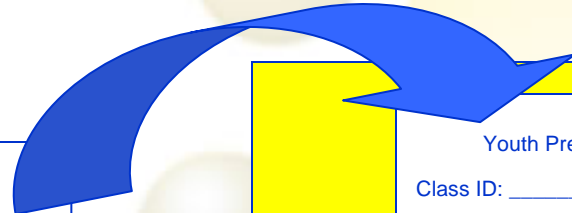
<u>Class ID</u>	<u>Agency</u>	<u>Program</u>	<u>District</u>	<u>School</u>	<u>Grade</u>	<u>Class Period</u>	<u>Teacher</u>	<u>Facilitator</u>	<u>Status</u>
4427	Case Testing 1	LST	Orange City School District	Ballard Brady Middle School	4	5	smith	jones	Incomplete
4477	Case Testing 1	TNT	Orange City School District	Ballard Brady Middle School	4	6	johnson	jackson	Incomplete
4479	Case Testing 1	ALRT	Orange City School District	Ballard Brady Middle School	8	8	smith	jones	Incomplete
4485	Case Testing 1	LST	Orange City School District	Ballard Brady Middle School	5	3	Jones	Trapl	Incomplete
4481	Case Testing 1	WOM	Solon	Grace L Roxbury Elementary School	4	6	jones	smith	Incomplete

1 - 5

Part 2: Preparation & Distribution of Youth Prevention Eval Packet

- Place ID number on the packet

YOUTH PREVENTION
CLASS ID: 04427
Curriculum: Life Skills
District: Orange City Schools
School: Ballard Brady
Teacher: Smith
Period: 5 Grade: 4
Facilitator: Jones
Date Completed: _____
Surveys Completed: _____



Youth Prevention:
Class ID: _____
Curriculum: _____
School: _____
Teacher: _____
Period: _____ Grade: _____
Facilitator: _____
Date Completed: _____
Surveys Completed: _____

Part 3: Implementation

- Program Facilitator **MUST** have packet prior to the **first** youth prevention class
- Fidelity Checklist should be completed by the facilitator after **EACH** class. Memory gets fuzzy after multiple classes!
- Facilitators should allow 10 minutes on last day of programming to administer Youth Prevention Survey and Teacher Reporting Form

Part 3: Implementation

ADMINISTERING THE SURVEY:

- **Set of Instructions for Facilitator**
 - Should be included in every packet
- **Downloadable MS Word Document**
 - RE Coordinator can modify name and return time at the bottom
 - Don't change “protocol” pieces
- **RECOMMENDED: Facilitator should return completed Packet within 48 hours of completion of the program**

Part 4: Data Entry and Reporting

UPON RETURN OF THE PACKETS:


- Confirm that ALL documents have been completed within the packet.
- Re-use blank Youth Prevention Surveys
- FAX Fidelity Checklist and Teacher Reporting Form to OTREC
 - Check your fax transmission report
- Enter student survey data into OTREC-DM

Part 4: Data Entry and Reporting

Enter each student's data into OTREC-DM

OTPF YOUTH PREVENTION SURVEY
(4th Grade and Up)

1. What is today's date?



2. Are you a boy or girl?

Boy Girl Unknown

3. How old are you?

8 or younger 12 years old
 9 years old 13 years old
 10 years old 14 years old
 11 Years old 15 or older
 Unknown

4. What grade are you in?

4th grade 7th grade
 5th grade 8th grade

8. Have you ever tried cigarette smoking even one or two puffs?

Yes No Unknown

9. During the last 30 days, on how many days did you smoke cigarettes?

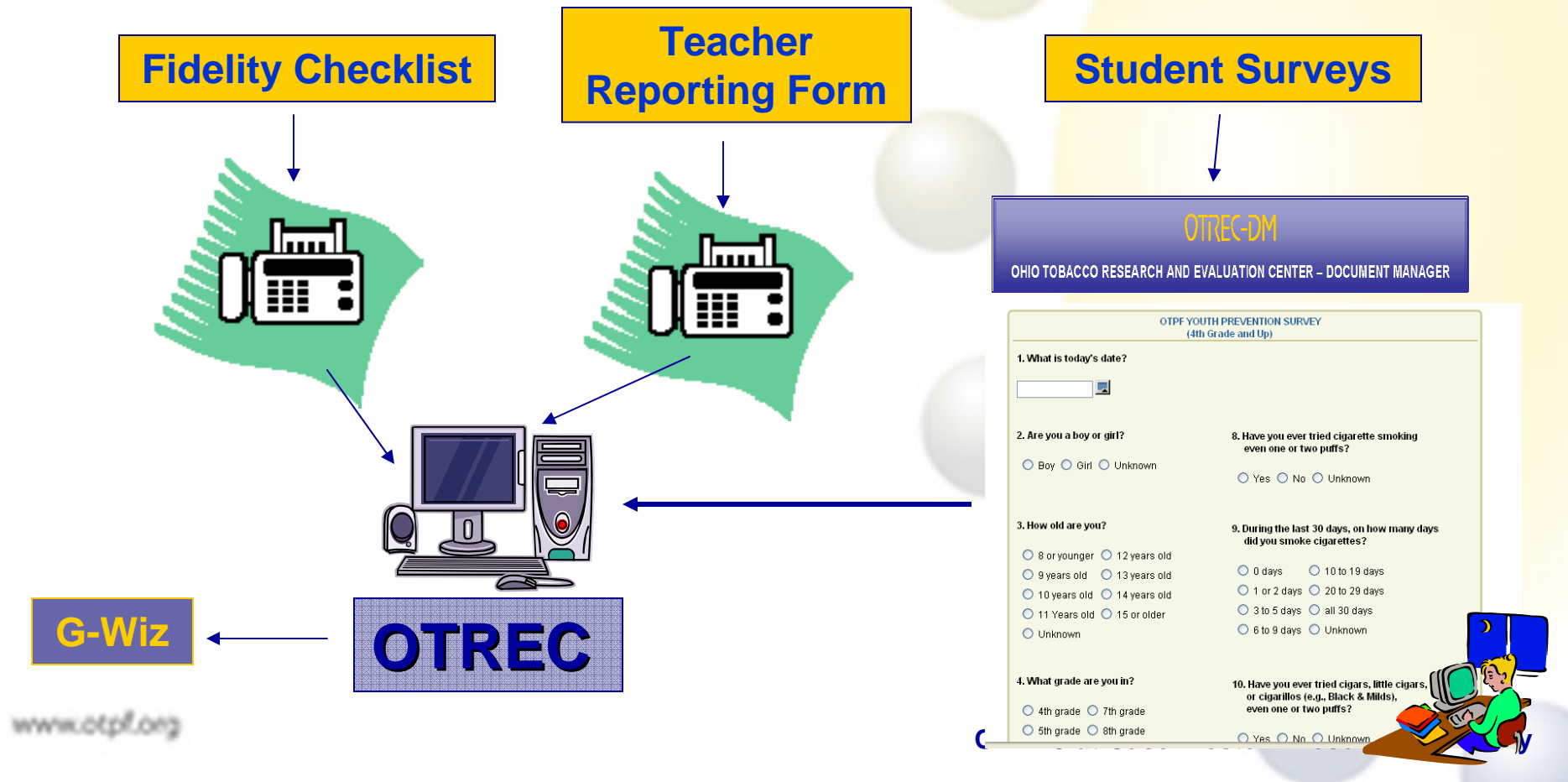
0 days 10 to 19 days
 1 or 2 days 20 to 29 days
 3 to 5 days all 30 days
 6 to 9 days Unknown

10. Have you ever tried cigars, little cigars, or cigarillos (e.g., Black & Milds), even one or two puffs?

Yes No Unknown

Submitting Data—Summary

- Once classroom data (fidelity, teacher report, study surveys) are collected.



Submitted Data in OTREC-DM

- Go to OTREC-DM to record your actions.
- Record dates when forms were faxed or data was entered.

Back To Class Assignments Save My Work

Class Info
Class ID 5714
School Gund School-Beech Brook
Grade 6:7
Period 3
Teacher Smith

Status: Teacher Reporting Form
Date Faxed 02-NOV-2006
Date Recv

Status: Fidelity Checklist
Date Faxed 02-NOV-2006
Date Recv

Status: Student Survey
Survey Entry Select a Type
surveys entered into DB 15

YOUTH_PREVENTION_SURVEY Detail Enter Survey
No data found.

Enter dates that teacher form and fidelity checklist was faxed

Once OTREC confirms receipt, date is entered into OTREC-DM

Confirm the number of surveys entered

Final Steps of Data Processing

- Once all three data sources (fidelity, implementation and student surveys) have been received – class status will switch to “Complete”.
- OTREC will compile all of the data and report back to G-Wiz

Located in the Evaluation Tools section of the manual.

School-based Youth Prevention Progress & Activity Report Worksheet



INFO NEEDED FOR THE PROGRESS AND ACTIVITY REPORT

Project Name: _____

Name of Individual Completing Report: _____ Reporting Period: _____

School District: _____ Curriculum: _____

Instructions: Please complete the information below and return this form to the RE Coordinator.

1. How many youth did you reach in each of the following grade levels?

- _____ 3rd Grade
- _____ 4th Grade
- _____ 5th Grade
- _____ 6th Grade
- _____ 7th Grade
- _____ 8th Grade
- _____ 9th Grade

2. Describe your activities related to this strategy during this reporting period.

3. Were there any significant changes from the proposed scope of work for this program? **YES NO**
If yes, please describe the changes.

4. What were the major barriers you experienced with this program?

School-based Youth Prevention: Reporting Worksheet

Located in the Evaluation Tools section of the manual.



Community-based Youth Prevention Progress & Activity Report Worksheet

Project Name: _____

Name of Individual Completing Report: _____ Reporting Period: _____

Community Site: _____ Curriculum: _____

Instructions: Please complete the information below and return this form to the RE Coordinator.

1. How many youth did you reach in each of the following grade levels?

- _____ 3rd Grade
- _____ 4th Grade
- _____ 5th Grade
- _____ 6th Grade
- _____ 7th Grade
- _____ 8th Grade
- _____ 9th Grade

2. Describe your activities related to this strategy during this reporting period.

3. Were there any significant changes from the proposed scope of work for this program? YES NO
If yes, please describe the changes.

4. What were the major barriers you experienced with this program?

INFO NEEDED FOR THE PROGRESS AND ACTIVITY REPORT

Community-based Youth Prevention: Reporting Worksheet



REPORTING IN G-Wiz

School-based AND Community-based Youth Prevention

- **PROGRESS REPORT:**
 - Bi-monthly reporting (February 28, April 30, June 30, August 31, October 31, December 31)
- **ACTIVITY REPORT:**
 - Bi-monthly reporting (February 28, April 30, June 30, August 31, October 31, December 31)
- **Evaluation Report:**
 - Results from all DC: provided by OTREC.

How many youth did you program to during this reporting period?

PROGRESS REPORT IN G-Wiz

Target Number you defined in your work plan

	Target	Cumulative Through Last Report	Percentage Completed	This Period
How many youth did you reach in the 3rd Grade?	22	0	0.00 %	<input type="text"/>
How many youth did you reach in the 4th Grade?	33	0	0.00 %	<input type="text"/>
How many youth did you reach in the 5th Grade?	0	0	NaN %	<input type="text"/>
How many youth did you reach in the 6th Grade?	0	0	NaN %	<input type="text"/>
How many youth did you reach in the 7th Grade?	0	0	NaN %	<input type="text"/>

Percentage Completed

The target numbers are automatically generated from your work plan.

Cumulative Target Reached

Enter the number of youth in each grade that you programmed to this period.

Any comments about the youth you programmed to in each grade?

Please enter a title for this Activity Report.

Name the Activity Report so that you'll be able to remember it later. Names cannot be changed later.

Describe your activities related to this strategy during this reporting period.

Rich text editor with toolbar and text area.

Which schools/community sites received programming during this period? Any other activities to share?

Were there any significant changes from your proposed scope of work for

- Yes
No

What were the major barriers you experienced with your program during this reporting period?

Rich text editor with toolbar and text area.

Place to tell your Program Manager at OTPF if your work plan has changed during this reporting period.

What are other important lessons learned that you would like to share with your program? What are the most important lessons learned from your program? What are the most important lessons learned from your program?

Rich text editor with toolbar and text area.

REMINDER: In order to receive credit for all data related to this work plan the relevant forms (Youth Survey, Fidelity Checklist, Teacher Reporting Form) must be submitted in a timely fashion to OTREC.

Have you submitted the required forms to OTREC?

- Yes
No

If you have not submitted the relevant reporting forms to OTREC by the time you submit your Activity Report, you will need to explain why.

Go to Top of Form

ACTIVITY REPORT IN G-Wiz



Questions???