

PART 2 – OBJECTIVE STATUS FORM

Fiscal Year: _____ 1st Report Period (July-Dec) 2nd Report Period (Jan-June)
 Objective Number: _____ Used for CPI Evaluation? Yes No

STRATEGY

<input type="checkbox"/> 1. Prevention Education: <input type="checkbox"/> Comprehensive Sexuality <input type="checkbox"/> Abstinence Focus
<input type="checkbox"/> 2. Information Presentation
<input type="checkbox"/> 3. Education & Support of Significant Adults, Parents Other Caregivers
<input type="checkbox"/> 4. Education and Support for Teens Mothers and Fathers
<input type="checkbox"/> 5. Male Involvement: <input type="checkbox"/> Male Responsibility Education <input type="checkbox"/> Youth Leadership Development <input type="checkbox"/> Life Skills Education
<input type="checkbox"/> 6. Service Learning
<input type="checkbox"/> 7. Peer Provided Services
<input type="checkbox"/> 8. Clinical Service Linkage
<input type="checkbox"/> 9. Train the Trainer
<input type="checkbox"/> 10. Mentoring: <input type="checkbox"/> Formal <input type="checkbox"/> Adult to Youth Partnership <input type="checkbox"/> Team <input type="checkbox"/> Group <input type="checkbox"/> Cross Age
<input type="checkbox"/> 11. Community Awareness and Mobilization: <input type="checkbox"/> Community Events <input type="checkbox"/> Advocacy Presentations <input type="checkbox"/> Media Presentation
<input type="checkbox"/> 12. Life Skills Education
<input type="checkbox"/> 13. Youth Leadership Development
<input type="checkbox"/> 14. Other: (Specify)

<u>NUMBER OF PARTICIPANTS SERVED</u>	1 st Report Period	2 nd Report Period	Total Served (Year to Date)	Projected/Target Number
<input type="checkbox"/> Multi-Session Intervention				
• Enrolled Participants				
• Participants who completed the intervention				
<input type="checkbox"/> Single Session Intervention				

Breakdown of the Total Number of Participants Served in this Objective (Year-to-Date):
 (For Multi-Session Strategies, use the number of participants enrolled.)

Number Served by Ethnic Group:

Number Served by Age Groups:

Number Served by Gender:

African American	
Anglo/White	
Asian	
Filipino	
Latino/Hispanic	
Native American	
Pacific Islander	
Other: _____	

11 and younger	
12- 14 years old	
15 -19 years old	
20 – 25 years old	
26 and older	

Female	
Male	

Who is primarily responsible for completing this objective? Lead Agency Sub-contractor Both
 Is Technical Assistance needed? Yes No
 Objective is on track to be completed by June 30 of the current fiscal year. Yes No Completed

Narrative: (Provide information on your progress for this objective. Describe the highlights and successes you have had in accomplishing this objective. Also include any barriers and efforts made to resolve them.)