

**INDIAN AND NATIVE AMERICAN YOUTH
PROGRAM ANNUAL / SEMI-ANNUAL REPORT**

OMB No. 1205-0422
Expires: 01/31/2020

SECTION I - Grantee Identifying Information	
Grantee Name and Address:	Grant Number: Report End Date:

	Previous Period (A)	Current Period (B)	Program to Date (C)
SECTION II - Participant / Exiter Summary - [Enter participants who enrolled in the program and exited during the program year.]			
1. Total Participants	<input type="text"/>	<input type="text"/>	<input type="text"/>
a. Participation in Summer Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Total Exiters	<input type="text"/>	<input type="text"/>	<input type="text"/>
a. Summer Employment Exiters	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Total Current Participants	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION III - Participant Characteristics Summary - [Enter characteristics of participants at enrollment.]				
	4. Male	<input type="text"/>	<input type="text"/>	<input type="text"/>
	5. Female	<input type="text"/>	<input type="text"/>	<input type="text"/>
	6. High School / Pre-High School Student	<input type="text"/>	<input type="text"/>	<input type="text"/>
	7. High School Graduate or Equivalent	<input type="text"/>	<input type="text"/>	<input type="text"/>
	8. Post High School Student	<input type="text"/>	<input type="text"/>	<input type="text"/>
	9. School Dropout	<input type="text"/>	<input type="text"/>	<input type="text"/>
	10. Pregnant and/or Parenting Youth	<input type="text"/>	<input type="text"/>	<input type="text"/>
	11. Offender	<input type="text"/>	<input type="text"/>	<input type="text"/>
	12. Foster Child	<input type="text"/>	<input type="text"/>	<input type="text"/>
	13. Public Assistance Recipient	<input type="text"/>	<input type="text"/>	<input type="text"/>
	14. Basic Skills Deficiency	<input type="text"/>	<input type="text"/>	<input type="text"/>
	15. Individual With Disability	<input type="text"/>	<input type="text"/>	<input type="text"/>
	16. In-school youth	<input type="text"/>	<input type="text"/>	<input type="text"/>
	17. Out-of-school youth	<input type="text"/>	<input type="text"/>	<input type="text"/>
	18. 14 - 18	<input type="text"/>	<input type="text"/>	<input type="text"/>
	19. 19 - 21	<input type="text"/>	<input type="text"/>	<input type="text"/>
	20. 22 - 24 (Recovery Act Participants Only)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	21. Eligible Veterans	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION IV - Participant Goals and/or Attainments Summary - [Enter goals attained after receiving program services.]

22. Completed Work Readiness			
23. Completed Internship or Vocational Exploration Program			
24. Completed Career Assessment			
25. Entered Unsubsidized Employment (Including Military)			
26. Remained in School			
27. Returned to School Full Time			
28. Enrolled in Job Corps			
29. Improved Basic Skills by at Least Two Grade Levels			
30. Attained High School Diploma			
31. Attained GED			
32. Completed Occupational Skills Training			
33. Completed Leadership Skills Training			
34. Entered Other (Non-Supplemental Youth) Training Program			
35. Successful Completion of Summer Employment			

Performance Items	Previous Period (A)		Current Period (B)		Program-to-Date (C)	
	Value	Numerator	Value	Numerator	Value	Numerator
		Denominator		Denominator		Denominator

SECTION V - Performance Outcomes / Performance

36. Attainment of Two or More Goals						
37. Educational Attainment for Dropouts						

Remarks:

Remarks area with a grid of arrows pointing to the right, indicating a continuation of text or a specific reporting format.

Certification: I certify that to the best of my knowledge and belief that this report is correct and complete for the purpose set forth in the Grant Agreement.

Grantee Name:

Phone No:

Email:

Certifying Official:

This reporting requirement is approved under the Paperwork Reduction Act of 1995, OMB Control No. 1205-0422. Persons are not required to respond to this collection of information unless it displays a currently valid OMB number and expiration date. Public reporting burden for this collection of information, which is required for obtaining or retaining benefits (PL 105-220, Sec. 166), is estimated to average 2 hours per response, including time for reviewing instructions, searching existing data sources, gathering and reviewing the collection of information. The reason for the collection of information is general program oversight, evaluation and performance assessment. Send comments regarding this burden to the U.S. Department of Labor, Employment and Training Administration, Indian and Native Americans Program, 200 Constitution Avenue, NW, Room N4209, Washington, D.C. 20210.