

**NASSAU COUNTY YOUTH BOARD**  
**2008 STATISTICAL/NARRATIVE QUARTERLY REPORT**

**Community Collaborations**  
**Youth Violence Gang Prevention/Intervention**

**SPONSORING AGENCY:** \_\_\_\_\_

**PROGRAM TITLE:** \_\_\_\_\_ **PROGRAM #:** \_\_\_\_\_

**Report Covers the Following Period:**

**1<sup>st</sup> Quarter:**\_\_\_\_ (Jan.-Mar.)      **2<sup>nd</sup> Quarter:**\_\_\_\_ (Apr.-June.)      **3<sup>rd</sup> Quarter:**\_\_\_\_ (July-Sept.)      **4<sup>th</sup> Quarter:**\_\_\_\_ (Oct.-Dec.)

**DEMOGRAPHIC PROFILE OF YOUTH SERVED – Complete for *youth 21 years and under only***

**1. TOTAL YOUTH SERVED:**

Indicate the total number of youth participating in the program for the Quarter.

**2. Total Educational Presentations this Quarter:** \_\_\_\_\_

**3. SEX (Indicate the # of Males and Females that participated in workshop presentations)**  
A. Male:\_\_\_\_\_ B. Female:\_\_\_\_\_ **TOTAL:**\_\_\_\_\_

**4. ETHNICITY**

A. White:\_\_\_\_\_ B. Black:\_\_\_\_\_ **TOTAL:**\_\_\_\_\_  
C. Hispanic:\_\_\_\_\_ D. Native American \_\_\_\_\_  
E. Asian:\_\_\_\_\_ F. Other:\_\_\_\_\_

**5. AGE**

A. 0-4:\_\_\_\_\_ B. 5-9:\_\_\_\_\_ **TOTAL:**\_\_\_\_\_  
C. 10-15:\_\_\_\_\_ D. 16-21:\_\_\_\_\_  
E. 21:\_\_\_\_\_

**ADULTS:**  
*Indicate the total number served over 21 years:* \_\_\_\_\_

Please indicate your agency's progress this quarter in achieving the following:

<b>Activities</b>	<b>Progress Or Obstacles/Barriers To Date</b>
<b>Collaborative Contacts:</b> Specify agencies/purpose and outcomes	
<b>Community Workshops/Forums held/attended:</b> indicate dates & numbers of people in attendance.	
<b>Staff Development held/attended:</b> indicate date(s) and topic(s).	

**SPECIAL ACTIVITIES/EVENTS/PRESENTATIONS:**

Description of Activity/ Event/Presentation	Date	Location	Number Board/Staff Parents/Vols.	Number of Youth
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
<b><i>PLEASE MAKE SURE TO ADD TOTALS:</i></b>			_____	_____

(Use additional pages if necessary)

Prepared by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_