**UTAH ABSTINENCE EDUCATION PROGRAM**

**SEMI ANNUAL PROGRESS REPORT**

Reporting Period: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_/\_\_\_\_\_/\_\_\_\_

Date Submitted:

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

Address:

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_

**I. IMPLEMENTATION PLAN PROGRESS:**

Based on your program’s approved Implementation Plan, use the table format on the following page to provide an update of the progress you have made thus far with your plan. It is only necessary to include information for the current reporting period. Be sure to report on all outcome and process objectives that are in your Implementation Plan. If you have not yet addressed certain objectives, simply state ‘Not yet addressed’ in the Progress/Update column. Please use one table for each outcome objective.

**Implementation Plan Progress Form**

**Program Goal Statement:**

|  |  |  |
| --- | --- | --- |
| **Outcome Objective #1:** | | |
| **Process Objectives** | **Activities/Steps** | **Progress/Updates** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**II.** **OUTCOME OBJECTIVE MEASURES:**

**In the far right-hand column, please fill in the percentage for each measure included on your pre/posttest. (Measures 1-4 are mandatory). You may also include any data for site specific objectives you wish to share at the end of the table.**

|  |  |  |
| --- | --- | --- |
| **REQUIRED MEASURES:** | | |
| **KNOWLEDGE** of reproductive health and abstinence. (Target is 80% for all indicators at posttest) | | |
| **Outcome Objective Measure:** | **Corresponding Survey Question:** | **Percentage of Program Participants Meeting the Objective:** |
| **Measure #1:**  % of program participants demonstrating a correct understanding of abstinence. | T or F: Abstinence is the only 100% effective way to avoid unplanned pregnancy or a STD, including HIV. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #2:**  % of program participants demonstrating an understanding of the benefits of abstinence. | Which of the following are benefits of choosing abstinence? (Multiple Choice)   * It will be easier to reach your goals * You will reduce your risk of some kinds of cancer or infertility * It will allow you to focus on getting to know your partner better * You won’t worry about STDs or an unplanned pregnancy | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected ALL (and only) correct answer choices.  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “It will be easier to reach your goals.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “You will reduce your risk of some kinds of cancer and infertility.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “It will allow you to focus on getting to know your partner better.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “You won’t worry about STDs or an unplanned pregnancy.” |
| **SKILLS** necessary to practice healthy behaviors and relationships. (Target is 70% for all indicators at posttest) | | |
| **Measure #3:**  % of program participants demonstrating effective communication, negotiation, and refusal skills. | Participants will pass off a roleplay scenario to their program educator/facilitator. | Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants demonstrated effective communication, negotiation, and refusal skills through an in-class roleplay scenario. |
| **INTENTION** to practice healthy behaviors. (Target is 40% for all indicators at posttest) | | |
| **Measure #4:**  % of program participants reporting an intention to practice abstinence. | Have you made a commitment to abstain from sexual activity until marriage?   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **OPTIONAL MEASURES:** | | |
| **KNOWLEDGE** of reproductive health and abstinence. (Target is 80% for all indicators at posttest) | | |
| **Outcome Objective Measure:** | **Corresponding Survey Question:** | **Percentage of Program Participants Meeting the Objective:** |
| **Measure #5:**  % of program participants correctly identifying common Sexually Transmitted Diseases (STDs). | Which of the following are common Sexually Transmitted Diseases (STDs)? (Multiple Choice)   * HIV/AIDS * Syphilis * Gonorrhea * Genital Herpes * Multiple Sclerosis * Chlamydia * Tuberculosis * Diabetes * Human Papillomavirus (HPV) * Influenza | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants listed ALL (and only) correct answer choices.  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “HIV/AIDS.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Syphilis.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Gonorrhea.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Genital Herpes.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Multiple Sclerosis.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Chlamydia.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Tuberculosis.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Diabetes.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Human Papillomavirus.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Influenza.” |
| **Measure #6:**  % of program participants demonstrating an understanding of the transmission of Sexually Transmitted Diseases (STDs). | T or F: A person with an STD who looks and feels healthy cannot give the infection to other people | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “False.” |
| **Measure #7:**  % of program participants demonstrating an understanding of the symptoms of Sexually Transmitted Diseases (STDs). | T or F: Often a person infected with STDs does not have any signs of infection | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #8:**  % of program participants demonstrating an understanding of the treatment of Sexually Transmitted Diseases (STDs). | T or F: All STDs can be cured by taking medicine | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “False.” |
| **Measure #9:**  % of program participants demonstrating an understanding of the four body fluids that transmit HIV. | T or F: The HIV virus is present in blood, semen, vaginal fluid, and breast milk | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #10:**  % of program participants demonstrating an understanding of the modes of transmission for HIV. | T or F: HIV can be spread by using someone’s personal belongings or sitting on a toilet seat. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “False.” |
| **Measure #11:**  % of program participants demonstrating an understanding of when pregnancy can occur. | T or F: A girl can NOT get pregnant the first time she has sex. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “False.” |
| **Measure #12:**  % of program participants identifying the correct definition of abstinence. | T or F: Abstinence means not having vaginal, anal, or oral sex | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #13:**  % of program participants demonstrating an understanding of reproductive health services available in their area. | Name three places where you can get tested for STDs or HIV.  (Answers will depend upon the resources available in your community. Some examples are local health departments, clinics, your doctor’s office, the AIDS Foundation, Centro Hispano, or Planned Parenthood). | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants listed THREE correct answer choices.  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants listed TWO correct answer choices.  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants listed ONE correct answer choice. |
| **Measure #14:**  % of program participants demonstrating an understanding of the characteristics of a healthy relationship. | Which of the following are characteristics of a healthy relationship? (Multiple Choice)   * Communication * Being with them for their looks * Honesty * Respect * Having things in common * Being a little jealous * Sexual activity * Trust * Spending all your time together * Having boundaries | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants listed ALL (and only) correct answer choices.  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Communication.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Being with them for their looks.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Honesty.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Respect.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Having things in common.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Being a little jealous.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Sexual activity.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Trust.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Spending all your time together.”  Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants selected “Having boundaries.” |
| **Measure #15:**  % of program participants demonstrating an understanding of the role of sexual activity in a healthy relationship. | T or F: Being in a healthy relationship includes being sexually active. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “False.” |
| **ATTITUDES** towards healthy behaviors and relationships. (Target is 50% for all indicators at posttest) | | |
| **Measure #16:**  % of program participants expressing a belief that abstinence is a good way to prevent pregnancy. | I think that abstinence is a good way to prevent pregnancy.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #17:**  % of program participants expressing a belief that abstinence is the only 100% effective method of preventing pregnancy and STDs, including HIV. | Do you think that abstinence from sexual activity is the only certain way to avoid unplanned pregnancy and STDs, including HIV?   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #18:**  % of program participants expressing a belief that abstinence is a good way to prevent STDs, including HIV. | I think that abstinence is a good way to prevent STDs, including HIV.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #19:**  % of program participants expressing a belief that anyone can be abstinent at any time. | T or F: Anyone can be abstinent at any time. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #20:**  % of program participants expressing a belief that choosing to be abstinent until marriage is normal and healthy. | T or F: Choosing to be abstinent until marriage is normal and healthy. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #21:**  % of program participants who feel they have friends who accept them and encourage them to be the best they can be. | I have friends who accept me for who I am and encourage me to be the best person I can be.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #22:**  % of program participants who feel they have at least one adult they trust and can talk to about important things. | I have at least one adult who I trust and can talk to about important things, like my goals, school, dating, or sex.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #23:**  % of program participants expressing a belief that the decisions they make affect those around them. | T or F: The decisions I make affect those around me. | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “True.” |
| **Measure #24:**  % of program participants who feel they have the power to make a difference in their family, school, or community. | I feel like I have the power to make a difference in my family, school, or community.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **Measure #25:**  % of program participants who feel comfortable discussing important topics like sex with friends, family members, or other adults they trust. | I feel comfortable discussing important topics like sex with my friends, family members, or other adults who I trust.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |
| **SKILLS** necessary to practice healthy behaviors and relationships. (Target is 70% for all indicators at posttest) | | |
| **Measure #26:**  % of program participants demonstrating an ability to set S.M.A.R.T. goals | List three goals that you have for yourself.  (Open ended—Answers must meet all the criteria of a S.M.A.R.T. Goal-- specific, measurable, achievable, realistic, and time-bound). | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants demonstrated an ability to set S.M.A.R.T. goals. |
| **INTENTION** to practice healthy behaviors. (Target is 40% for all indicators at posttest) | | |
| **Measure #26:**  % of program participants reporting an intention to be tested for STDs/HIV. | If I’ve had unprotected sex in the past or have unprotected sex in the future, I will get tested for STDs/HIV.   * Yes * No | Pre: \_\_\_/\_\_\_=\_\_\_\_%  Post: \_\_\_/\_\_\_=\_\_\_\_% of program participants answered “Yes.” |

**III. ACTIVITY AND NUMBERS SERVED FORMS A-D:**

Complete the following four required forms:

* Form A—Unduplicated Count of Clients Served
* Form B—Hours of Service Received By Clients
* Form C—Program Completion Data
* Form D—Communities Served

**INSTRUCTIONS FOR THE COMPLETION OF FORM A**

**UNDUPLICATED COUNT OF CLIENTS SERVED**

Purpose of Form A

The purpose of Form A, Unduplicated Count of Clients Served, is to track and report the unduplicated number of youth and parents served. Each client is counted only once.

General Instructions

Form A should be submitted as part of all required reports.

Complete each cell in Form A for an unduplicated number of clients served in all programs funded by the abstinence education grant except for media campaigns.

In determining the age of a client, use the age of the client at the first point of contact during the program year.

If your program has served youth that are younger than 10 during the report period, include that data under the row “Other Females or Other Males.”

If you are helping young adults in making decisions related to abstinence and the young adults happen to be young parents, record these young parents under their ages.

If your program is implementing a media campaign, report such activities, and the numbers served, in the narrative of your program progress report.

Use the following definitions when determining race:

* **Asian -**A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
* **Black or African American -**A person having origins in any of the black racial groups of Africa.
* **Hispanic or Latino -**A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."
* **American Indian or Alaska Native -**A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
* **Native Hawaiian or Other Pacific Islander -**A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
* **White -**A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
* **Other (not required by OMB) -**A person wishing to identify himself or herself as “other” rather

than one of the demographic groups described above.

**INSTRUCTIONS FOR THE COMPLETION OF FORM B**

**HOURS OF SERVICE RECEIVED BY CLIENTS**

Purpose of the Form

The purpose of Form B, Hours of Service Received by Clients, is to track and report the total number of “program hours” that clients have received during the report period.

For example, a grantee may provide 1,000 ninth grade students with a 20-hour curriculum program while also providing 5,000 other youth with a one-hour event. Form B allows the grantee to report these numbers in greater detail, rather than averaging the program hours together. Averaged together, the result would show that 6,000 youth received an average of 4 hours of service, which would not clearly represent the nature of the programs. A more detailed report of the example is captured in the sample table rows below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Program Hours Received** | By 10-13 year olds | By 14-16 | By 17-20 |
|  | 5,000 |  |  |
| 20 | 1,000 |  |  |
| **Total 9-14** | **6,000** |  |  |

General Instructions

Indicate the number of clients, by age group, who received the total number of hours listed for each row. Only fill in the rows and columns that apply to your program.

Programming may only be reported in full hour increments. All sessions should be rounded to the nearest full hour. For example, a 45 minute session should be rounded to 1 full hour of programming.

For clients that receive services from multiple programs, program staff must add together the time received so that only one number of program hours received will be recorded for each client served. For example, if a client participated in 17 hours of a 20-hour curriculum program and also participated in a one hour event, the total number of program hours for that client would be 18.

Do not include any media campaign activities on Form B. Rather, report such activities and the numbers served in the narrative of this program progress report.

The total number of clients served in each of the columns should be equal to the unduplicated count of clients served for those groups given at the top of this form and Form A.

**INSTRUCTIONS FOR THE COMPLETION OF FORM C**

**PROGRAM COMPLETION DATA**

Purpose of the Form

The purpose of Form C, Program Completion Data, is to track and report the number of all clients that complete the various types of program(s) offered.

General Instructions

In the first column, list the types of programs offered by the grantee during the program year. A grantee may have several programs such as separate programs for middle school and high school students, events, or training programs, etc. Data should be recorded for each type of program with a distinct number of program hours. For example, if a program offers two after-school curriculum programs with one totaling 12 hours and the second totaling 24 hours, these should be recorded separately. However, if a grantee offers three after-school programs that all provide 15 hours of programming, the data for these should be added together and recorded in one row.

Grantees and sub-grantees should use the following names of program types in column one:

|  |  |
| --- | --- |
| * In-class abstinence curriculum * After school abstinence curriculum * Parent education * Training for abstinence educators | * Mentoring (one-on-one) * Conference, retreat * Rally, assembly * Additional programs (youth presenters, drama, etc.) |

For additional programs, name the type of program in column A, and describe it in the narrative section of this program progress report. In the second column, list the total number of program hours that were provided by each program type. In the last four columns, list the number of clients that completed at least 75% of the program above the total number of clients served for each of the age ranges indicated. The total number of clients served by all programs, if they were to be added together, may be greater than the unduplicated count of all clients, as reported on Form A, if clients participated in more than one program.

Please see the following example:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of Program (choose from list on instruction sheet) | Number of Program Hours Provided | Number of Clients that complete at least 75% of the program | | | |
| Number of Clients Served | | | |
| 10-13 years | 14-16 years | 17-20 years | Parents or Other Adults |
| In-class abstinence curriculum | 4 |  | 26 | 5 |  |
|  | 30 | 5 |  |

The above example indicates that 35 youth participated in 4 hours of In-class abstinence curriculum.

Out of those 35 youth, 31 completed at least 75% of the program hours provided.

**INSTRUCTIONS FOR THE COMPLETION OF FORM D**

**COMMUNITIES SERVED**

Purpose of the Form

The purpose of Form D, Communities Served, is to track and report geographical areas in which the grantee has provided services.

General Instructions

Record the geographical areas in which all programs were provided during the reporting period by state, county, and city/town. A separate row should be used for each county in which services were provided.

Narrative (If applicable)

If needed, submit with forms A-D a narrative that describes any elements related to Forms A-D that need to be explained. For example, the narrative should describe:

* clients served through media activities;
* groups that have been combined under “Other Females or Other Males” on Form A; or
* an explanation of why youth outside of the targeted population of (10-16 years of age) were served.

Organize the narrative in the order of Form A through Form D, and use headings to clearly identify which form the narrative is describing.

**IV. BARRIERS:**

What barriers did your site encountered during this year’s program implementation? What are some possible strategies that can be used to overcome these barriers?

|  |  |
| --- | --- |
| Barrier | Possible Solutions |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**V. TRAINING NEEDS:**

What are some training needs you have or issues you would like to see addressed at the state or federal level?

|  |  |
| --- | --- |
| Training Need | Ideas For Addressing |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**VI. REPORT DUE DATE:**

|  |  |
| --- | --- |
| **SEMI - ANNUAL PROGRESS REPORT** | **DUE DATE** |
| Reporting Periods:  1st Semi-Annual Report: October 1 – March 31  2nd Semi-Annual Report: April 1 – September 30 | April 10  October 10 |

* Semi-Annual Report must be received by 5:00 PM on due dates. (April 10 and October 10).
* Reimbursements will be held until any currently due reports are received.
* Please submit 1 electronic copy (preferred) **or** 1 hard copy of the report to:

Elizabeth Gerke

PREP & Abstinence Program Coordinator

Utah Department of Health

Maternal & Infant Health Program

PO Box 142001

Salt Lake City, UT 84114-2001

Phone: 801-273-2870

E-mail: [egerke@utah.gov](mailto:egerke@utah.gov)