



	Provider Name: Program Name:	Number of days in Quarter	Total Clients Served	Total Female	Total Male	18-24 Female
FY 16-17/ Program Outcomes	Q1	92				
	Q2	91				
	Q3	91				
	Q4	92				
FY 17-18/ Program Outcomes	Q1					
	Q2					
	Q3					
	Q4					
FY 18-19/ Program Outcomes	Q1					
	Q2					
	Q3					
	Q4					
FY 19-20/ Program Outcomes	Q1					
	Q2					
	Q3					
	Q4					

<u>Ethnicity</u>	Hispanic/ Latino	Non-Hispanic/Non-latino	<u>Current Homeless Status</u>	Homeless	Stably Housed

<u>Program</u> <u>Specifics</u>					

