


FY16-17 Program Outcomes Report

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







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

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<u>Program Specifics</u>					