

2018-19 Partner Agency Quarterly Report

This report must be completed by supervisors **in consultation with the members.

Site Supervisor Name:

Date:

Partner Agency Name:

Quarter:

1st Qtr (Sept-Dec) due Dec. 20th

2nd Qtr (Jan-Mar) due Mar. 20th

3rd Qtr (Apr-June) due June 20th

4th Qtr (July-Aug) Aug. 20th

MEMBER IMPACT:

1. Name of any member(s) who left this quarter:

2. In complete sentences, please demonstrate how your AmeriCorps members are making an impact in EACH of the following areas:
 - a. Describe how AmeriCorps members' service is making an impact in the community that would not have been possible through existing staff and/or volunteers.

 - b. Describe how your organization has ensured that members consistently find satisfaction, meaning and opportunity.

3. Please have EACH MEMBER complete the following information.

a)	Member Name: <i>Share one or more "great stories" from this quarter that demonstrate how you are making a difference in the community. Please provide pictures if available.</i>
b)	Member Name: <i>Share one or more "great stories" from this quarter that demonstrate how you are making a difference in the community. Please provide pictures if available.</i>
c)	Member Name: <i>Share one or more "great stories" from this quarter that demonstrate how you are making a difference in the community. Please provide pictures if available.</i>
d)	Member Name: <i>Share one or more "great stories" from this quarter that demonstrate how you are making a difference in the community. Please provide pictures if available.</i>

e)	Member Name:
	<i>Share one or more "great stories" from this quarter that demonstrate how you are making a difference in the community. Please provide pictures if available.</i>

4. Please complete the following information for EACH MEMBER regarding hours served to date.

Use this chart to help determine if member is on track to complete their service hours.

QUARTER	FULL-TIME	PART-TIME	QUARTER-TIME
1st Quarter: <i>Sept – Dec</i>	500-560	220-280	100-140
2nd Quarter: <i>Jan – March</i>	900-1040	500-560	220-250
3rd Quarter: <i>April - June</i>	1440-1520	750-800	350-380
4th Quarter: <i>July - August</i>	Minimum 1700	Minimum 900	Minimum 450

a)	Member Name:
	<p>i. Number of hours served to date. <i>(Hours can be obtained in OnCorps Reports.)</i></p> <p>ii. Based on above chart, is the member’s progress: <input type="checkbox"/>On track <input type="checkbox"/>Ahead <input type="checkbox"/> Behind</p> <p>iii. If the member is behind on their hours, please provide a plan below on how the member intends to make up these hours.</p> <p>iv. Please share anything that has changed in the member’s life that might interfere with their AmeriCorps commitment (i.e., got a new job, working more hours, started school, applying to school, applying to study abroad, internship, etc.).</p>
b)	Member Name:
	<p>i. Number of hours served to date. <i>(Hours can be obtained in OnCorps Reports.)</i></p> <p>ii. Based on above chart, is the member’s progress: <input type="checkbox"/>On track <input type="checkbox"/>Ahead <input type="checkbox"/> Behind</p> <p>iii. If the member is behind on their hours, please provide a plan below on how the member intends to make up these hours.</p> <p>iv. Please share anything that has changed in the member’s life that might interfere with their AmeriCorps commitment (i.e., got a new job, working more hours, started school, applying to school, applying to study abroad, internship, etc.).</p>
c)	Member Name:

	<p>v. Number of hours served to date. <i>(Hours can be obtained in OnCorps Reports.)</i></p> <p>vi. Based on above chart, is the member's progress: <input type="checkbox"/>On track <input type="checkbox"/>Ahead <input type="checkbox"/> Behind</p> <p>vii. If the member is behind on their hours, please provide a plan below on how the member intends to make up these hours.</p> <p>viii. Please share anything that has changed in the member's life that might interfere with their AmeriCorps commitment (i.e., got a new job, working more hours, started school, applying to school, applying to study abroad, internship, etc.).</p> <p>i.</p>
d)	<p>Member Name:</p> <p>ix. Number of hours served to date. <i>(Hours can be obtained in OnCorps Reports.)</i></p> <p>x. Based on above chart, is the member's progress: <input type="checkbox"/>On track <input type="checkbox"/>Ahead <input type="checkbox"/> Behind</p> <p>xi. If the member is behind on their hours, please provide a plan below on how the member intends to make up these hours.</p> <p>xii. Please share anything that has changed in the member's life that might interfere with their AmeriCorps commitment (i.e., got a new job, working more hours, started school, applying to school, applying to study abroad, internship, etc.).</p>
e)	<p>Member Name:</p> <p>xiii. Number of hours served to date. <i>(Hours can be obtained in OnCorps Reports.)</i></p> <p>xiv. Based on above chart, is the member's progress: <input type="checkbox"/>On track <input type="checkbox"/>Ahead <input type="checkbox"/> Behind</p> <p>xv. If the member is behind on their hours, please provide a plan below on how the member intends to make up these hours.</p> <p>xvi. Please share anything that has changed in the member's life that might interfere with their AmeriCorps commitment (i.e., got a new job, working more hours, started school, applying to school, applying to study abroad, internship, etc.).</p>

5. Volunteer Recruitment:

If your member(s) recruited NEW volunteers during this quarter, how many were:

Episodic

Ongoing

6. Please complete the following (for all members combined) considering this quarter only:

- a. Did your members participate in a disaster service project? Yes No
- b. Did your members respond to a local disaster? Yes No
- c. How many people served by your members were affected by a disaster?

7. *OPTIONAL*: MEMBER OF THE QUARTER Nomination

Supervisors, please take a moment to nominate ONE MEMBER who you feel has performed well and deserves to be recognized for their service contributions this quarter (1st, 2nd, and 3rd Quarters Only). Provide the member name and a short description of accomplishments made by this member. If possible, include number of clients served, volunteers recruited, success stories relating to clients, special event, significant impact made, etc. to illustrate above and beyond the call of duties.