

**OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION
TRIBAL YOUTH PROGRAM**

DCTAT DATA COLLECTION FORM

Reporting Period: _____

This document is for your use to assist with gathering information that should be reported into the DCTAT tool. It is not necessary to submit this form to OJJDP. It is only for your information.

Award Information

Federal Award Number: (Prepopulated) _____

Award Start Date: (Prepopulated) _____
(mm/dd/yyyy)

Award End Date: (Prepopulated) _____
(mm/dd/yyyy)

Total amount of (Federal Funds Only): (Prepopulated) \$ _____

1. Please enter the federal Congressional District(s) of where services are provided: _____

Checkboxes will appear in the system, where you will select your state/territory and Federal Congressional District(s).

Click <http://www.house.gov>, to use the zip code(s) of the area(s) served by the project to determine the Federal Congressional District(s).

2. Please enter the Project Title: _____

a. Please enter the Project Description: _____

3. Please enter the Implementing Organization Name: _____

4. Please select the implementing organization type:

- | | |
|--|---|
| <input type="checkbox"/> Coalition | <input type="checkbox"/> Police/other law enforcement |
| <input type="checkbox"/> Juvenile Justice | <input type="checkbox"/> School/Other Education |
| <input type="checkbox"/> Non-profit community-based organization | <input type="checkbox"/> Tribal Government |
| <input type="checkbox"/> Other community-based organization | <input type="checkbox"/> Unit of local government |
| <input type="checkbox"/> Other government agency | |

5. Is this award used to implement evidence-based programs? Yes No

6. If yes, select one source from which the program model was cited:

- | | |
|---|--|
| <input type="checkbox"/> Blueprints for Violence Prevention | <input type="checkbox"/> Hamilton Fish Institute |
| <input type="checkbox"/> CASEL (Collaborative for Academic, Social, & Emotional learning) | <input type="checkbox"/> Institute for Medicine |
| <input type="checkbox"/> Centers for Disease Control and Prevention | <input type="checkbox"/> NIDA Preventing Drug Abuse |
| <input type="checkbox"/> Community Guide to Helping America's Youth | <input type="checkbox"/> National Institute of Justice What Works Report |
| <input type="checkbox"/> Department of Education Safe, Disciplined, & Drug-free Schools | <input type="checkbox"/> OJJDP Model Programs Guide |
| <input type="checkbox"/> Drug Strategies, Inc. | <input type="checkbox"/> Promising Practices Network |
| <input type="checkbox"/> Making the Grade | <input type="checkbox"/> SAMSHA Model Programs |
| | <input type="checkbox"/> Surgeon General's Youth Violence Report |
| | <input type="checkbox"/> Other (e.g., State model program resources) |

7. If other, please specify: _____

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Target Population for this Award

Please check the appropriate boxes to indicate for this award:

1. The population actually served during the project period; and
2. The populations, if any, to which the program offers targeted services.

Targeted services include any services or approaches specifically designed to meet the needs of the population (e.g., Sex specific, culturally based, developmentally appropriate services).

Table 1: Target Population Information

	Population	1. Did you serve this group during the reporting period?	2. Did this award provide targeted services for any of the following groups?
RACE/ETHNICITY	American Indian/Alaskan Native	—	—
	Asian	—	—
	Black/African American	—	—
	Hispanic or Latino (of any race)	—	—
	Native Hawaiian and Other Pacific Islander	—	—
	Other Race	—	—
	White/Caucasian	—	—
	Youth population not directly served	—	—
JUSTICE	At-Risk Population (no prior offense)	—	—
	First Time Offenders	—	—
	Repeat Offenders	—	—
	Sex Offenders	—	—
	Status Offenders	—	—
	Violent Offenders	—	—
	Youth population not directly served	—	—
SEX	Male	—	—
	Female	—	—
	Youth population not directly served	—	—
AGE	0–10	—	—
	11–18	—	—
	Over 18	—	—
	Youth population not directly served	—	—
GEO	Rural	—	—
	Suburban	—	—
	Tribal	—	—
	Urban	—	—
	Youth population not directly served	—	—
OTHER	Mental Health	—	—
	Substance Abuse	—	—
	Truant/Dropout	—	—

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Program Category Selection

Select one or more primary program category for grant-funded activities.

	Program Category
	Planning Period*
	1. Prevention Services
	2. Interventions for Court-Involved Tribal Youth
	3. Tribal Juvenile Justice System
	4. Alcohol and Drug Abuse Prevention Programs
	5. Mental Health Program Services
	6. Indigent Defense

*The program category *Planning Period* refers to the 12-month period following the start date of the award. Grantees who are entering data for a reporting period that is within the Planning Period time frame will be asked to answer performance measures about the planning activities conducted. Please refer to the TYP Performance Measures Grid for more information.

Performance Measures

For this section, please find the "performance measure grid by category" on the DCTAT sign-in page under the grant program name. Please print out the selected program category grids to add to this document. Record the collected data in the "Record Data Here" column for each performance measure.