|  |  |
| --- | --- |
| **Staff Name & Credentials:**  | **Signature:**  |
| **Staff Name & Credentials:**  | **Signature:**  |
| **Address/Location/Virtual Platform:**  | **County:**  | **Zip Code:**  |
| **Contact’s Name:**  | **Contact’s Telephone:**  |
| **Date of Service:**  | **Start time:**  | **End Time:**  | **Total Hours/Units:**  |
| **Group name:** | **Activity Name:** | **Record #:** |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Credentialed/Specifically Focused staff required:** |  | Yes | **YTA/Synar related:** |  | Yes | **Gambling Prevention:** |  | Yes | **School Based Activity:** |  | Yes |
|  | No |  | No |  | No |  | No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Group Type** | **Program Type** | **Activity Count** | **Intervention Type** | **Service Population Code** |
|  | One time |  | Individual  |  | Min. |  | Indicated  |  |
|  | Ongoing-Other |  | Population  |  | Max. |  | Selective |
|  | Ongoing-Sequential |  |  |  |  |  | Univ. Direct |  |
|  |  |  |  |  |  |  | Univ Indirect |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Service Domain** | **EBP Service Type** | **Funding Source** | **Primary Strategy Code** |
|  | Individual  |  | NREPP |  | 01-SAPT |  |
|  | Family |  | Other Federal Agency |  | 02-Other (PA2) |
|  | Peer |  | Peer Reviewed Journal |  | 07-GDPV |  |  |
|  | School/Work |  | Local (PIHP) Evidence |  | 08-SOR II  |  |  |
|  | Community  |  | CBP Best practice |  | 09-COVID  |  |  |
|  | Society/Envir. |  | YTA/SYNAR |  | 10-ARP |  |  |
|  |  |  | None of the above  |  | 12-SOR 3 |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Total Attendees/** |  | **New Males** |  | **Completed Group** |
| **Est. People Reached** |  | **New Females** | (Final Session) |

|  |  |  |
| --- | --- | --- |
| **Race** |  **Age** | **Ethnicity** |
|  | African American  |  | 0-4 |  | 18-20 |  | Arab-American/Chaldean  |
|  | American Indigenous/Alaskan Native  |  | 5-11 |  | 21-24 |  | Hispanic/Latino  |
|  | Asian |  | 12-14 |  | 25-44 |  | Not Listed |
|  | Hawaii/Pacific Islander  |  | 15-17 |  | 45-64 |  |  |
|  | Multi-Racial |  |  |  | 65+ |  |  |
|  | White |  |  |  |  |  |  |
|  | Unknown/Other |  |  |  |  |  |  |

|  |
| --- |
| Notes: |
|  |
|  |

*\*This form was modified and is highly recommended to be used by all Prevention Providers effective 1/2024*