

**U.S. Department of Justice**  
**Office on Violence Against Women**  
**SEMI-ANNUAL PROGRESS REPORT FOR**

**Legal Assistance for Victims Grant Program**

**Brief Instructions:** This form must be completed for each Legal Assistance for Victims Program (LAV Program) grant received. The grant administrator or coordinator must ensure that the form is completed fully with regard to all grant-funded activities. Grant partners, however, may complete sections relevant to their portion of the grant. Grant administrators and coordinators are responsible for compiling and submitting a single report that reflects all information collected from grant partners.

All grantees should read each section to determine which questions they must answer based on the activities engaged in under this grant during the current reporting period. Sections B and E must be completed by all grantees. In section A, subsection A1 must be answered. In section C, subsection C2 must be answered. In section D and subsections A2, C1, C3, C4, and C5, grantees must answer an initial question about whether they engaged in certain activities during the current reporting period. If the response is yes, then the grantee must complete that section or subsection. If the response is no, the rest of that section or subsection is skipped.

For example, 1) if you are a legal services organization providing legal services with staff funded under this grant, you would complete sections A, B, D, E, and subsection C2 (and answer “no” in C1, C3, C4, and C5); or 2) if you receive funds for staff to provide training and technical assistance and funds for data collection, you would complete sections A, B, and E, and subsections C1, C2, C4, and C5 (and answer “no” in C3).

The activities of volunteers or interns should be reported if they were coordinated or supervised by LAV Program-funded staff or if LAV Program funds substantially supported their activities.

For further information on filling out this form, refer to the separate instructions, which contain detailed definitions and examples illustrating how questions should be answered.

SECTION	Page Number
Section A: General Information	1
A1: Grant Information	1
A2: Staff Information	3
Section B: Purpose Areas	4
Section C: Function Areas	5
C1: Training	5
C2: Coordinated Community Response	8
C3: Products	10
C4: Technical Assistance	11
C5: Data Collection	12
Section D: Victim Services/Legal Services	13
Section E: Narrative	21

Use this form for the July - December Reporting Period

SECTION **A1**

### GENERAL INFORMATION

### Grant Information

All grantees must complete this subsection.

- 1. **Date of report**       (format date with 6 digits - 01/31/07)
- 2. **Current reporting period**  January 1-June 30  July 1-December 31  (Year)
- 3. **Grantee name** \_\_\_\_\_
- 4. **Grant number** \_\_\_\_\_  
(the federal grant number assigned to your LAV Program grant)

- 5. **Type of grantee organization**  
(Check the one answer that best describes the organization receiving the LAV Program funds.)
  - Bar association
  - Bar foundation/IOLTA administrator
  - Law school
  - Legal aid/assistance (non-Legal Services Corporation)
  - Legal services organization (Legal Services Corporation funded)
  - State coalition
  - Tribal government/organization
  - Victim services (domestic violence)
  - Victim services (dual—domestic violence/sexual assault)
  - Victim services (sexual assault)
  - Other (specify): \_\_\_\_\_

- 5a. **Is this organization a faith-based organization?**  
 Yes  No

- 6. **Point of contact**  
(person responsible for the day-to-day coordination of the grant)  
 First name \_\_\_\_\_ MI \_\_\_\_\_ Last name \_\_\_\_\_  
 Agency/organization name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
 Telephone \_\_\_\_\_ Facsimile \_\_\_\_\_  
 E-mail \_\_\_\_\_

- 7. **Does this grant specifically address tribal populations?**  
(Check yes if your LAV Program grant focuses on tribal populations, and indicate which tribes or nations you serve or intend to serve.)  
 Yes  No **If yes**, which tribes/nations: \_\_\_\_\_

Use this form for the July - December Reporting Period

- 8. What percentage of your LAV Program grant funds was directed to each of these areas?**  
*(Report the area(s) addressed by your LAV Program grant during the current reporting period and estimate the approximate percentage of funds [or resources] used to address each area [consider training, victim services, etc.]. The grantee may choose how to make this determination.)*

Throughout this form, the term **sexual assault** includes both assaults committed by offenders who are strangers to the victim/survivor and assaults committed by offenders who are known to, related by blood or marriage to, or in a dating relationship with the victim/survivor. The term **domestic violence/dating violence** applies to any pattern of coercive behavior that is used by one person to gain power and control over a current or former intimate partner or dating partner. **Stalking** is defined as a course of conduct directed at a specific person that would cause a reasonable person to fear for his or her safety or the safety of others, or suffer substantial emotional distress. *(See separate instructions for more complete definitions.)*

	Percentage of grant funds
Sexual assault	<input type="text"/>
Domestic violence/dating violence	<input type="text"/>
Stalking	<input type="text"/>
<b>TOTAL</b> <i>(must equal 100%)</i>	<input type="text"/>

**SECTION A2**

**Staff Information**

**Were LAV Program funds used to fund staff positions during the current reporting period?**

Check yes if LAV Program grant funds were used to pay staff, including part-time staff and contractors.

- Yes—answer question 9
- No—skip to section B

**9. Staff**

*(Report the total number of full-time equivalent (FTE) staff funded by the LAV Program grant during the current reporting period. Report staff by functions performed, not by title or location. Include employees who are part-time and/or only partially funded with these grant funds, as well as consultants/contractors. If an employee or contractor was employed or utilized for only a portion of the reporting period, prorate appropriately. For example, if you hired a full-time attorney in October who was 100% funded with LAV Program funds, you would report that as .5 FTE. Report all FTEs in decimals, not percentages. One FTE is equal to 1,040 hours—40 hours per week x 26 weeks. See separate instructions for examples of how to calculate FTEs.)*

Staff	FTE(s)
Administrator ( <i>fiscal manager, executive director</i> )	<input type="text"/>
Attorney	<input type="text"/>
Information technology staff	<input type="text"/>
Law student/intern	<input type="text"/>
Legal advocate ( <i>does not include attorney or paralegal</i> )	<input type="text"/>
Paralegal	<input type="text"/>
Program coordinator ( <i>training coordinator, legal staff coordinator</i> )	<input type="text"/>
Support staff ( <i>administrative assistant, bookkeeper, accountant</i> )	<input type="text"/>
Trainer	<input type="text"/>
Translator/interpreter	<input type="text"/>
Victim advocate ( <i>includes domestic violence, sexual assault, and dual</i> )	<input type="text"/>
Other ( <i>specify</i> ): <input type="text"/>	<input type="text"/>
<b>TOTAL</b>	<input type="text"/>

**SECTION B**

**Purpose Areas**

All grantees must complete this section.

**10. Statutory purpose areas**

*(Check all purpose areas that apply to activities supported with LAV Program grant funds during the current reporting period.)*

Check ALL that apply	Purpose areas
<input type="checkbox"/>	To implement, expand, and establish cooperative efforts and projects between domestic violence and sexual assault victim services organizations and legal assistance providers to provide legal assistance for victims of sexual assault, stalking, domestic violence, and dating violence. (In most cases, this purpose area refers to legal services organizations.)
<input type="checkbox"/>	To implement, expand and establish efforts and projects to provide legal assistance for victims of domestic violence, dating violence, stalking, and sexual assault by organizations with a demonstrated history of providing direct legal or advocacy services on behalf of these victims. (In most cases, this purpose area refers to victim services organizations.)
<input type="checkbox"/>	To provide training, technical assistance and data collection to improve the capacity of grantees and other entities to offer legal assistance to victims of domestic violence, dating violence, stalking, and sexual assault.

**11. Special interest categories addressed by your grant**

*(In addition to the purpose areas identified above, the LAV Program Grant Application and Program Guidelines may have identified several special interest categories or program priorities that would receive priority consideration. If your program addressed any of these special interest categories or priorities during the current reporting period, list them below.)*

Use this form for the July - December Reporting Period

**SECTION C1**

**FUNCTION AREAS**  
**Training**

**Were your LAV Program funds used for training during the current reporting period?**

Check yes if LAV Program-funded staff provided training or if grant funds directly supported the training.

- Yes—answer questions 12-15
- No—skip to C2

**12. Training events provided**

*(Report the total number of training events during the current reporting period that were either provided by LAV Program-funded staff or directly supported by LAV Program funds. For purposes of this reporting form, training provided to LAV Program-funded staff should not be counted. For purposes of this reporting form, **training** means providing information on sexual assault, dating violence, domestic violence, and/or stalking that enables professionals to improve their response to victims/survivors as it relates to their role in the system.)*

Total number of training events provided

**13. Number of people trained**

*(Report the number of people trained during the current reporting period by LAV Program-funded staff or training supported by LAV Program funds. Use the category that is most descriptive of the people who attended the training event. LAV Program-funded staff attending training events should not be counted as people trained. If you do not know how many people to report in specific categories, you may report them in "Multidisciplinary," but this category should be used only as a last resort. Students, community members, and victims should not be reported as people trained, since they are not professionals responding to victims.)*

People trained	Number	People trained	Number
Advocacy organization staff (NAACP, AARP)	<input style="width: 100px; height: 20px;" type="text"/>	Law students	<input style="width: 100px; height: 20px;" type="text"/>
Attorneys (does not include prosecutors)	<input style="width: 100px; height: 20px;" type="text"/>	Mental health professionals	<input style="width: 100px; height: 20px;" type="text"/>
Bar association/volunteer lawyer program staff	<input style="width: 100px; height: 20px;" type="text"/>	Multidisciplinary (various disciplines at same training)	<input style="width: 100px; height: 20px;" type="text"/>
Batterer intervention program staff	<input style="width: 100px; height: 20px;" type="text"/>	Prosecutors	<input style="width: 100px; height: 20px;" type="text"/>
Child welfare workers/advocates	<input style="width: 100px; height: 20px;" type="text"/>	Sex offender treatment providers	<input style="width: 100px; height: 20px;" type="text"/>
Court personnel (judges, clerks)	<input style="width: 100px; height: 20px;" type="text"/>	Sexual assault coalition staff (state or tribal)	<input style="width: 100px; height: 20px;" type="text"/>
Disability organization staff (non-governmental)	<input style="width: 100px; height: 20px;" type="text"/>	Social services organization staff (non-governmental—food bank, homeless shelter)	<input style="width: 100px; height: 20px;" type="text"/>
Domestic violence coalition staff (state or tribal)	<input style="width: 100px; height: 20px;" type="text"/>	Supervised visitation and exchange center staff	<input style="width: 100px; height: 20px;" type="text"/>
Elder organization staff (non-governmental)	<input style="width: 100px; height: 20px;" type="text"/>	Translators/interpreters	<input style="width: 100px; height: 20px;" type="text"/>
Faith-based organization staff	<input style="width: 100px; height: 20px;" type="text"/>	Tribal government/Tribal government agency staff	<input style="width: 100px; height: 20px;" type="text"/>
Government agency staff (vocational rehabilitation, food stamps, TANF)	<input style="width: 100px; height: 20px;" type="text"/>	Victim advocates (non-governmental, includes sexual assault, domestic violence, and dual)	<input style="width: 100px; height: 20px;" type="text"/>
Health professionals (doctors, nurses)	<input style="width: 100px; height: 20px;" type="text"/>	Victim-assistants (governmental, includes victim-witness specialists/coordinators)	<input style="width: 100px; height: 20px;" type="text"/>
Immigrant organization staff	<input style="width: 100px; height: 20px;" type="text"/>	Volunteers	<input style="width: 100px; height: 20px;" type="text"/>
Legal services staff (does not include attorneys)	<input style="width: 100px; height: 20px;" type="text"/>	Other (specify): <input style="width: 150px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>
Law enforcement officers	<input style="width: 100px; height: 20px;" type="text"/>	<b>TOTAL</b>	<input style="width: 100px; height: 20px;" type="text"/>

**14. Training content areas**

(Indicate all topics covered in training events provided or directly supported with your LAV Program funds during the current reporting period. Check all that apply.)

- Confidentiality
- Consumer/finance (*credit, debt, bankruptcy, tax, etc.*)
- Dating violence laws
- Dating violence overview, dynamics and services
- Divorce/custody/visitation/child support
- Domestic violence laws
- Domestic violence overview, dynamics and services
- Housing
- Identifying legal issues
- Immigration
- Protection orders (*including full faith and credit*)
- Public benefits (*TANF, disability, food stamps, unemployment*)
- Relocation
- Representation/advocacy for victims/survivors within the criminal justice system
- Representation/advocacy for victims/survivors within the educational system
- Response to victims/survivors who have been trafficked
- Safety planning
- Serving underserved/unserved populations
- Sexual assault laws
- Sexual assault overview, dynamics and services
- Stalking laws
- Stalking overview, dynamics and services
- Other (*specify*):

**Issues specific to victims/survivors who:**

- are American Indian or Alaska Native
- are Asian
- are black or African American
- are elderly
- are Hispanic or Latino
- are homeless or living in poverty
- are immigrants, refugees, or asylum seekers
- are lesbian, gay, bisexual, transgender, or intersex
- are Native Hawaiian or Other Pacific Islander
- have disabilities
- have limited English proficiency
- have mental health issues
- have substance abuse issues
- live in rural areas
- Other (*specify*): \_\_\_\_\_

**15. (Optional) Additional information**

*(Use the space below to discuss the effectiveness of training activities funded or supported by your LAV Program grant and to provide any additional information you would like to share about your training activities beyond what you have provided in the data above. An example might be an increased number of referrals of sexual assault victims/survivors to your organization from both governmental and non-governmental victim advocates following a training provided to both groups on identifying legal issues for these victims/survivors.) (Maximum 2000 characters)*



Use this form for the July - December Reporting Period



## Coordinated Community Response

All grantees must answer this subsection.

### 16. Coordinated community response activities

(Check the appropriate boxes to indicate the agencies or organizations, even if they are not memorandum of understanding memorandum of understanding [MOU] partners, that you provided victim/survivor referrals to, received victim/survivor referrals from, engaged in consultation regarding victims/survivors with, provided technical assistance regarding victims/survivors to, and/or attended meetings with, during the current reporting period, according to the usual frequency of the interactions. If the interactions were not part of a regular schedule, you will need to estimate the frequency with which these interactions occurred during the current reporting period. If LAV-funded staff participated in a task force or work group, indicate that under "Meetings" by checking the frequency of the meetings and the types of organizations participating. In the last column, indicate the agencies or organizations with which you have an MOU for purposes of the LAV Program grant.)

Agency/organization	Victim/survivor referrals, consultations, technical assistance			Meetings			MOU Partner
	Daily	Weekly	Monthly	Weekly	Monthly	Quarterly	
Advocacy organization (NAACP, AARP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrections (probation, parole, and correctional facility)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Court	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational institution/organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faith-based organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Government agency (INS, Social Security, TANF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health/mental health organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law enforcement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal organization (legal services, bar association, law school)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prosecutor's office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual assault organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex offender management/sex offender treatment provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social service organization (non-governmental)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tribal government/Tribal government agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify): <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use this form for the July - December Reporting Period

**17. (Optional) Additional information**

*(Use the space below to discuss the effectiveness of CCR activities funded or supported by your LAV Program grant and to provide any additional information you would like to share about those activities beyond what you have provided in the data above. An example might be an improved judicial response to victims/survivors requesting protection orders, as the result of meetings of a regional task force that included victim advocates, legal services attorneys, and judges.) (Maximum 2000 characters)*



## Products

**Were your LAV Program funds used to develop, substantially revise, or distribute products during the current reporting period?**

Check yes if LAV Program-funded staff developed products, or if LAV Program funds directly supported the development, revision, or distribution of products.

- Yes—answer question 18
- No—skip to C4

**18. Use of LAV Program funds for product development, substantial revision, or distribution**

*(Report the number of products developed, substantially revised, or distributed with LAV Program grant funds during the current reporting period. Report the number of new products developed or substantially revised during the current reporting period; the title/topic and intended audience of each product developed, revised, or distributed; and the number of products used or distributed. If a product was created in or translated into a language other than English, including Braille, indicate the language. Report on products that were newly developed during the current reporting period whether or not they were used or distributed, and on products that were previously developed or revised but were used or distributed during the current reporting period. Do not report the number of products printed or copied; only report the number developed or revised—in most cases that number will be one for each product described—and/or the number used or distributed. See separate instructions for examples of how to report under “Developed or revised” and “Used or distributed.”)*

Products	Number developed or revised	Title/topic	Intended audience	Number used or distributed	Other languages
Brochures	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Client education materials	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Manuals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Training curricula	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Training materials	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (specify):	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**SECTION C4**

**Technical Assistance**

**Were your LAV Program funds used to provide technical assistance during the current reporting period?**

Check yes if grant-funded staff provided technical assistance or if grant funds directly supported the provision of technical assistance.

- Yes—answer question 19
- No—skip to C5

**19. Technical assistance provided**

*(Indicate the area[s] of technical assistance addressed and the type of recipient. Technical assistance is any of a wide variety of activities designed to facilitate individual or agency change in some systematic manner by providing expertise to solve a problem. Check all that apply.)*

	Sexual assault	Domestic violence/ dating violence	Stalking
Attorneys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friends of the court/mediators/guardians ad litem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal services staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prosecutors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim advocates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use this form for the July - December Reporting Period



## Data Collection

### Were your LAV Program funds used to develop, install, expand, or coordinate data collection systems during the current reporting period?

Check yes if LAV Program funds or LAV Program-funded staff were used to develop, install, expand, and/or coordinate data collection systems.

- Yes—answer question 20
- No—skip to section D

### 20. Use of LAV Program funds for data collection systems

(Check all that apply.)

- Develop new data collection system
- Install data collection systems
- Expand existing data collection system
- Coordinate existing data collection
- Purchase computers and other equipment

Use this form for the July - December Reporting Period



## VICTIM SERVICES/LEGAL SERVICES

### Were your LAV Program funds used to provide victim services and/or legal services to victims/survivors during the current reporting period?

Check yes if LAV Program grant-funded staff provided these services to victims/survivors, or if grant funds were used to support these services.

- Yes—answer questions 21-31 as appropriate. Provide information only on victims/survivors served with LAV Program funds. If your LAV Program funds were used to work with pro bono attorneys and/or law students, also answer questions 32-33.
- No—skip to section E

### 21. Number of victims/survivors served, partially served, and victims/survivors seeking services who were not served

*Please do not answer this question without referring to the separate instructions for further explanation and examples of how to distinguish among these categories.*

*(Report the following, to the best of your ability, as an unduplicated count for each category during the current reporting period. This means that each victim/survivor who was seeking or who received services during the current reporting period should be counted only once in that reporting period. For purposes of this question, victims/survivors are those against whom the sexual assault, domestic violence, dating violence, or stalking was directed. If the victim/survivor presented with more than one victimization, that person should be counted only once under the primary victimization. Do not report secondary victims here.)*

	Sexual assault	Domestic violence/ dating violence	Stalking	TOTAL
<b>A. Served:</b> victims/survivors who received the service(s) they requested, if those services were funded by your LAV Program grant	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>B. Partially served:</b> victims/survivors who received some service(s), but not all of the services they requested, if those services were funded by your LAV Program grant	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL SERVED AND PARTIALLY SERVED (21A + 21B)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>C. Victims/survivors seeking services who were not served:</b> victims/survivors who sought service(s) and did not receive the service(s) they were seeking, if those services were funded by your LAV Program grant	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### 22. Reasons victims/survivors seeking services were not served or were partially served

*(Check all that apply.)*

- Conflict of interest
- Did not meet statutory requirements
- Hours of operation
- Insufficient/lack of culturally appropriate services
- Insufficient/lack of language capacity (including sign language)
- Insufficient/lack of services for people with disabilities
- Lack of child care
- Need not documented
- Program reached capacity
- Program unable to provide service due to limited resources/priority-setting
- Services inappropriate or inadequate for victims/survivors with mental health issues
- Services inappropriate or inadequate for victims/survivors with substance abuse issues
- Services not appropriate for victim/survivor
- Transportation
- Other (specify):

Use this form for the July - December Reporting Period

**23. Demographics of victims/survivors served or partially served**

(Based on the victims/survivors reported in 21A and 21B, report the total numbers for all that apply. Because victims/survivors may identify in more than one category of race/ethnicity, the total for "Race/ethnicity" may exceed the total number of victims/survivors reported in 21A and 21B. However, the total number of victims/survivors reported under "Race/ethnicity" should not be less than the total number of victims/survivors reported in 21A and 21B. The total number of victims/survivors reported under "Gender" and the total number reported under "Age" should equal the total number of victims/survivors reported in 21A and 21B. Those victims for whom gender, age, and/or race/ethnicity are not known should be reported in the "Unknown" category.)

<b>Race/ethnicity</b> (victims/survivors should not be counted more than once in either the category "American Indian or Alaska Native" or in the category "Native Hawaiian or Other Pacific Islander")	<b>Number of victims/survivors</b>
American Indian or Alaska Native	<input type="text"/>
Asian	<input type="text"/>
Black or African American	<input type="text"/>
Hispanic or Latino	<input type="text"/>
Native Hawaiian or Other Pacific Islander	<input type="text"/>
White	<input type="text"/>
Unknown	<input type="text"/>
<b>TOTAL RACE/ETHNICITY</b> (should not be less than _____, the sum of 21A and 21B)	<input type="text"/>
<b>Gender</b>	
Female	<input type="text"/>
Male	<input type="text"/>
Unknown	<input type="text"/>
<b>TOTAL GENDER</b> (should equal _____, the sum of 21A and 21B)	<input type="text"/>
<b>Age</b>	
0-12	<input type="text"/>
13-17	<input type="text"/>
18-24	<input type="text"/>
25-59	<input type="text"/>
60 +	<input type="text"/>
Unknown	<input type="text"/>
<b>TOTAL AGE</b> (should equal _____, the sum of 21A and 21B)	<input type="text"/>
<b>Other demographics</b>	
People with disabilities	<input type="text"/>
People with limited English proficiency	<input type="text"/>
People who are immigrants/refugees/asylum seekers	<input type="text"/>
People who live in rural areas	<input type="text"/>

Use this form for the July - December Reporting Period

**24. Victims/survivors' relationship to offender by victimization**

(For those victims/survivors reported as served and partially served in questions 21A and 21B, report the victim/survivor relationship to the offender by type of victimization. If a victim/survivor experienced more than one type of victimization and/or was victimized by more than one perpetrator, count the victim/survivor in all categories that apply. The total number of relationships in the sexual assault column must be at least \_\_\_\_\_, the sum of sexual assault victims/survivors reported in 21A and 21B; the total number in the domestic violence/dating violence column must be at least \_\_\_\_\_, the sum of domestic violence victims/survivors reported in 21A and 21B; and the total number in the stalking column must be at least \_\_\_\_\_, the sum of stalking victims/survivors reported in 21A and 21B.)

Victim/survivor's relationships to offender	Number of victim/survivor relationships by victimization		
	Sexual assault	Domestic violence/dating violence	Stalking
Current or former spouse or intimate partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other family or household member	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dating relationship	<input type="text"/>	<input type="text"/>	<input type="text"/>
Acquaintance (neighbor, employee, co-worker, schoolmate, student, etc.)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Stranger	<input type="text"/>	<input type="text"/>	<input type="text"/>
Relationship unknown	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**25. Victim services provided by lawyers**

(Report the number of victims/survivors from 21A and 21B who received the following services from LAV Program-funded lawyers during the current reporting period by type of service. Count each victim/survivor only once for each type of service that victim/survivor received during the current reporting period; do not report the number of times that service was provided to the victim/survivor. The total for each type of service should not be higher than \_\_\_\_\_, the total of 21A and 21B. Note that question 27 below addresses the provision of legal services to victims/survivors.)

Victim services provided by lawyers	Number of victims/survivors
Safety planning	<input type="text"/>
Support services (assisting the victim/survivor to obtain resources or services including employment, health care, child care, etc.)	<input type="text"/>
Pro se clinics/group services	<input type="text"/>

**26. Victim services provided by other staff**

(Report the number of victims/survivors from 21A and 21B who received the following services from other LAV Program-funded staff [e.g., paralegals, advocates, case managers, etc.] during the current reporting period by type of service. Count each victim/survivor only once for each type of service received during the current reporting period; do not report the number of times that service was provided to the victim/survivor. The total for each category of service should not be higher than \_\_\_\_\_, the total of 21A and 21B.)

Victim services provided by other staff	Number of victims/survivors
Safety planning	<input type="text"/>
Support services (assisting the victim/survivor to obtain resources or services including employment, health care, child care, etc.)	<input type="text"/>
Non-attorney legal advocacy (assisting the victim/survivor in preparing legal paperwork, accompanying her/him to court or administrative proceedings, etc.)	<input type="text"/>
Pro se clinics/group services	<input type="text"/>



Use this form for the July - December Reporting Period

**27. Legal issues**

(Report the total number of new and pending matters in which the following legal issues were addressed by LAV-funded staff during the current reporting period. Count a victim/survivor once in each category of legal issue [A-I] for which they received assistance. For B. Family law matters and G. Immigration matters, provide an unduplicated count of victims who received assistance in one or more of the subcategories listed under each of those general categories, and report the number of victims who received assistance in each of the subcategories. A pending matter is one that was open as of the first day of the current reporting period; a new matter is one that was opened during the current reporting period.)

Legal issues	Number of victims/survivors	
	Pending	New
A. Protection orders (temporary and final, enforcement of existing PO)	<input type="text"/>	<input type="text"/>
B. Family law matters (unduplicated count of victims receiving assistance in one or more of the subcategories [i-v] below)	<input type="text"/>	<input type="text"/>
i. Divorce	<input type="text"/>	<input type="text"/>
ii. Custody/visitation	<input type="text"/>	<input type="text"/>
iii. Establishment of paternity	<input type="text"/>	<input type="text"/>
iv. Child/spousal support	<input type="text"/>	<input type="text"/>
v. Other family law matters	<input type="text"/>	<input type="text"/>
C. Consumer/finance (credit, debt, bankruptcy, tax, etc.)	<input type="text"/>	<input type="text"/>
D. Employment	<input type="text"/>	<input type="text"/>
E. Income maintenance (TANF, disability, food stamps, unemployment)	<input type="text"/>	<input type="text"/>
F. Housing	<input type="text"/>	<input type="text"/>
G. Immigration matters (unduplicated count of victims receiving assistance in one or more of the subcategories [i-v] below)	<input type="text"/>	<input type="text"/>
i. VAWA self-petition	<input type="text"/>	<input type="text"/>
ii. Cancellation of removal	<input type="text"/>	<input type="text"/>
iii. U visa	<input type="text"/>	<input type="text"/>
iv. T visa	<input type="text"/>	<input type="text"/>
v. Other immigration matters	<input type="text"/>	<input type="text"/>
H. Criminal issues (sexual assault, domestic violence/dating violence, stalking. Does not include defending victims/survivors accused of criminal activities.)	<input type="text"/>	<input type="text"/>
I. Educational issues	<input type="text"/>	<input type="text"/>
J. Other (specify): <input type="text"/>	<input type="text"/>	<input type="text"/>

**28. Number of victims/survivors who received assistance with multiple legal issues**

(Report the number of victims/survivors who received LAV Program-funded services in more than one of the categories [A-J] listed in question 27 during the current reporting period. For purposes of this question, consider all family law matters [section B] as one category and all immigration matters [section G] as one category.)

Use this form for the July - December Reporting Period

**29. Comprehensive services**

*(If victims/survivors received other needed legal services for matters such as those listed in question 27 from other sources [i.e., from your organization but with non-LAV funds, or from another source, such as pro bono attorneys], describe those sources. You may provide data to demonstrate that those additional needs of victims/survivors were met.) (Maximum 2000 characters)*

Use this form for the July - December Reporting Period

**30. Legal outcomes**

(For all cases closed or issues resolved during the current reporting period for which services were provided by LAV Program-funded lawyers, paralegals, or specially appointed advocates, report the number and type of outcome for each issue addressed and resolved. Include all outcomes in all matters.)

Legal issue	Information/referral/advice only	Brief services	Administrative decision	Court decision	Negotiated resolution		Victim/survivor withdrew	Other result
					Filed action	No filed action		
Protection orders ( <i>temporary and final, enforcement of existing PO</i> )	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Divorce	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Custody/visitation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Establishment of paternity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child/spousal support	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other family law matters	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Consumer/finance ( <i>credit, debt, bankruptcy, tax, etc.</i> )	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Income maintenance ( <i>TANF, disability, food stamps, unemployment</i> )	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Housing	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VAWA self-petition	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cancellation of removal	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
U Visa	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
T Visa	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other immigration matters ( <i>specify</i> ):	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Criminal issues	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Educational issues	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other ( <i>specify</i> ):	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Use this form for the July - December Reporting Period

**31. (Optional) Additional information**

*(Use the space below to discuss the effectiveness of the legal services you have provided to victims/survivors that were funded or supported by LAV Program funds and to share any additional information about your legal services activities beyond what you have provided in the data above. An example might be that you are requesting and obtaining protection orders that address child and spousal support as well as custody and visitation on a regular basis on behalf of victims/survivors.) (Maximum 2000 characters)*

Use this form for the July - December Reporting Period

**32. a. Pro bono attorneys**

*(Report the total number of pro bono attorneys recruited, trained, mentored or coordinated using LAV funds during the current reporting period.)*

Recruited	<input type="text"/>
Trained	<input type="text"/>
Mentored	<input type="text"/>
Coordinated	<input type="text"/>

**b. Cases accepted**

*(Report the number of cases accepted by pro bono attorneys during the current reporting period.)*

**c. Cases completed**

*(Report the number of cases completed by pro bono attorneys during the current reporting period.)*

**33. a. Volunteer law students**

*(Report the total number of law students recruited, trained, mentored, or coordinated using LAV funds during the current reporting period.)*

Recruited	<input type="text"/>
Trained	<input type="text"/>
Mentored	<input type="text"/>
Coordinated	<input type="text"/>

**b. Cases worked on**

*(Report the number of cases worked on by law students during the current reporting period.)*

Use this form for the July - December Reporting Period

SECTION **E**

## NARRATIVE

**All grantees must answer question 34.**

PLEASE LIMIT YOUR RESPONSE TO THE SPACE PROVIDED.

**34. Report on the status of your LAV Program grant goals and objectives as of the end of the current reporting period.**

*(Report succinctly on the status of the goals and objectives for your LAV Program grant as of the end of the current reporting period, as they were identified grant proposal as they have been added or revised. Indicate whether the activities related to your objectives for the current reporting period have been completed, are in progress, are delayed, or have been revised. Comment briefly on your successes and challenges, and provide any additional explanation you feel is necessary for us to understand what you have or have not accomplished relative to your goals and objectives. If you have not accomplished objectives that should have been accomplished during the current reporting period, you must provide an explanation.)*

**All grantees providing direct legal services must answer question 35.**

PLEASE LIMIT YOUR RESPONSE TO THE SPACE PROVIDED.

**35. Describe the nature of the outcomes achieved for victims/survivors during the current reporting period. Discuss the reasons for those outcomes and, if appropriate, any systemic patterns or practices that you believe were contributing factors to the outcomes of specific cases or to cases in general involving victims/survivors.**

**All grantees must answer questions 36 and 37 on an annual basis. Submit responses on the January to June reporting form only.**

PLEASE LIMIT YOUR RESPONSE TO THE SPACE PROVIDED.

**36. What do you see as the most significant areas of remaining need, with regard to meeting the civil legal needs of victims/survivors of sexual assault, domestic violence, dating violence, and stalking?**

*(Consider geographic regions, underserved populations, service delivery systems, types of legal problems, and challenges and barriers unique to your state or service area.)*

**37. What has LAV Program funding allowed you to do that you could not do prior to receiving this funding?**

*(e.g., expanding service areas and populations served, expanding range of services offered to victims/survivors)*

**Questions 38 and 39 are optional.**

PLEASE LIMIT YOUR RESPONSE TO THE SPACE PROVIDED.

**38. Provide any additional information that you would like us to know about your LAV Program grant and/or the effectiveness of your grant.**

*(If you have any other data or information that you have not already reported in answers to previous questions on this form that demonstrate the effectiveness of your LAV Program-funded program, please provide it below. Feel free to discuss any of the following: systems-level changes, community collaboration, the removal or reduction of barriers and challenges for victims/survivors, promising practices, positive or negative unintended consequence.)*

**39. Provide any additional information that you would like us to know about the data submitted.**

*(If you have any information that could be helpful in understanding the data you have submitted in this report, please answer this question. For example, if you submitted two different progress reports for the same reporting period, you may explain how the data was apportioned to each report; if you funded staff—e.g., advocates and attorneys—but did not report any corresponding victim services or legal services, you may explain why; or if you did not use program funds to support either staff or activities during the reporting period, please explain how program funds were used, if you have not already done so.)*

### Public Reporting Burden

Paperwork Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete and file this form is 60 minutes per form. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Office on Violence Against Women, U.S. Department of Justice, 800 K Street, NW, Washington, DC 20531.

Use this form for the July - December Reporting Period

Report on the status of your LAV Program grant goals and objectives as of the end of the current reporting period. - **Question #34**

<b>Goals/Objectives</b> (1,750 characters)	<b>Status</b> (100 characters)	<input type="text"/>
<b>Key Activities</b> (1,750 characters)		
<b>Comments</b> (500 characters)		
<b>Goals/Objectives</b>	<b>Status</b>	<input type="text"/>
<b>Key Activities</b>		
<b>Comments</b>		

Use this form for the July - December Reporting Period

Report on the status of your LAV Program grant goals and objectives as of the end of the current reporting period. - **Question #34 (cont. 1)**

<b>Goals/Objectives</b>	<b>Status</b>	<input type="text"/>
<b>Key Activities</b>		
<b>Comments</b>		
<b>Goals/Objectives</b>	<b>Status</b>	<input type="text"/>
<b>Key Activities</b>		
<b>Comments</b>		



Use this form for the July - December Reporting Period

Report on the status of your LAV Program grant goals and objectives as of the end of the current reporting period. - **Question #34 (cont. 2)**

<b>Goals/Objectives</b>	<b>Status</b>	<input type="text"/>
<b>Key Activities</b>		
<b>Comments</b>		
<b>Goals/Objectives</b>	<b>Status</b>	<input type="text"/>
<b>Key Activities</b>		
<b>Comments</b>		

Use this form for the July - December Reporting Period

Describe the nature of the outcomes achieved for victims/survivors during the current reporting period. Discuss the reasons for those outcomes and, if appropriate, any systemic patterns or practices that you believe were contributing factors to the outcomes of specific cases or to cases in general involving victims/survivors.

**- Question #35**

Use this form for the July - December Reporting Period

Describe the nature of the outcomes achieved for victims/survivors during the current reporting period. Discuss the reasons for those outcomes and, if appropriate, any systemic patterns or practices that you believe were contributing factors to the outcomes of specific cases or to cases in general involving victims/survivors.  
**- Question #35 (cont.)**

What do you see as the most significant areas of remaining need, with regard to meeting the civil legal needs of victims/survivors of sexual assault, domestic violence, dating violence, and stalking? - **Question #36**

[Empty response box for Question #36]

Use this form for the July - December Reporting Period

What do you see as the most significant areas of remaining need, with regard to meeting the civil legal needs of victims/survivors of sexual assault, domestic violence, dating violence, and stalking? - **Question #36 (cont.)**

[Empty response box for Question #36 (cont.)]

Use this form for the July - December Reporting Period

What has LAV Program funding allowed you to do that you could not do prior to receiving this funding?  
**- Question # 37**

[Empty response box for Question # 37]

What has LAV Program funding allowed you to do that you could not do prior to receiving this funding?  
**- Question # 37 (cont.)**

[Empty response box]

Use this form for the July - December Reporting Period

Provide any additional information that you would like us to know about your LAV Program grant and/or the effectiveness of your grant. - **Question # 38**



Use this form for the July - December Reporting Period

Provide any additional information that you would like us to know about your LAV Program grant and/or the effectiveness of your grant. - **Question # 38 (cont.)**

[Empty response box for Question # 38 (cont.)]

Provide any additional information that you would like us to know about the data submitted. - **Question # 39**

Provide any additional information that you would like us to know about the data submitted. - **Question # 39 (cont.)**

Use this form for the July - December Reporting Period