



Kent County Community Action Year End Report



Name of Agency _____

Project / Program Name _____

Name of Person Completing This Form _____

Phone Number of Person Completing This Form _____

Contract Period: _____

Accomplishments

Please complete Racial and Ethnic data for the **head of household** only.

Please report the total number of **unduplicated people** you have served in each of the following categories:

Racial and Ethnic background	# Hispanic	Total #
Caucasian	_____	_____
African America	_____	_____
Asian	_____	_____
American Indian and Alaskan Native	_____	_____
Native Hawaiian or Other Pacific Islander	_____	_____
Other Multiracial	_____	_____
Total Number of Persons Served	_____	_____

Income Level	Total #
Please report for the entire household:	
0-30% Area Median Income	_____
31-50% Area Median Income	_____
51-80% Area Median Income	_____

Household Type	Total #
Household Living Alone (NON-Elderly)	_____
Elderly Household (Over 65)	_____
Male Household (no wife present with children under 18 years of age)	_____
Female Household (no husband present with children under 18 years of age)	_____
Two parent household (with children under 18 years of age)	_____
Other	_____