## **REPORT 2019 July Cycle**

GENERAL INFORMATION						
Organization Information	Organization Information					
Legal Name:		Federal Tax ID#:				
Children's Shelter (The)		74-1109660				
Address:	City:	State:	Zip Code:			
2939 W Woodlawn Ave	San Antonio	TX	78228			
Website:		Fax:				
https://www.childrensshelter.org		(210) 212-2500				
Head Of Organization	Head Of Organization					
Name:		Title:				
Annette Rodriguez		President/CEO				
E-Mail Address:		Phone:				
arodriguez@chshel.org		(210) 212-2570				
Application Contact						
Name:	Title:	E-Mail Address:	Phone:			
Denise Bennett	Director of Development	jbobo@chshel.org	(210) 212-2570			
<b>REPORT INFORMA</b>	TION					
<b>Report Funding Cycle:</b>		Report Date:				
2019 July Cycle		06/01/2020 12:00 am				
1: Please include in your report the dollar amount of the funds that were awarded, the date they were funded and what the funds supported.						
Awarded Amount: 75,000		Date: 08/15/2019				
<ul> <li>2: Were the objectives cited in your original proposal met? Please address each started objective and how it was met.</li> <li>Objectives were to provide support for The Children's Shelter's Family Strengthening programs. The Family Strengthening programs consistently sereve more than 500 adults and 2,000 children annually.</li> </ul>						
3: Please explain any changes from the original proposal and the circumstances that lead to the modification of the objective.						
No changes from the original proposal were encountered.						
4: What needs were addressed?						
parenting education, social In Fiscal Year 2019, the Co children. Of these men, 30 overall child-rearing and p 100% have had no reports program served 262 caregi immunizations, 100% of p years) were developmental	I supports, and access to resompadre Y Compadre (R) p 6 successfully completed th ositive parenting attitudes; or incidents of abuse, negle ivers and 371 children. Of the arents had no occurrence of lly on-target.	elp prevent child abuse or ne ources families need to beco program served 569 fathers a le program and graduated; 9 100% committed to parentin ect or abandonment. Also in hese, 99% of children were child abuse or neglect, and	ome nurturing family units. and impacted their 1,470 7% improved in their ng without violence; and FY 19, the iParent SA(R) up to date with 85% of children (0-5			
5: What method of evaluation did you use to monitor and measure the project's outcome and what are the result?						

All adult participants complete the Adult Adolescent Parenting Inventory-2 (AAPI) at the beginning and at the end of services provided. In both programs, all participants showed improvement in their scores. Children of families enrolled are assessed every six months for the period of time the client is enrolled using the Ages and Stages Questionnaire (ASQ). All applicants also indicated 100% satisfaction with the services provided on their customer service survey.

## 6: Do you plan to continue this project, and if so, how do you plan to sustain it?

The Children's Shelter feels the services provided by these programs is imperative to the health and well-being of the San Antonio community at large. The iParent program is receiving some funding from the Bexar County courts. Additional funding for sources for both programs are being researched and funding will continually be requested as appropriate and needed.

## 7: Please provide any other comments ot information relevant to this grant.

The support provided to these programs by the Najim Family Foundation has been instrumental in their continued success. Thank you for your support.

8: Please provide an updated detailed projected budget with expenses for the received grant. Also include the totals for the budgeted and actual amount. Explain any discrepancies between the budgeted and the actual expenses for the project.

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Line Item Description	Total Project Funds Allocation	Najim Requested Funds	Project Funds Actual	Najim Funds Allocation
Salaries	\$1,521,728	\$75,000	\$75,000	\$75,000
Payroll Taxes	\$153,865	\$0	\$0	\$0
Employee Benefits	\$251,226	\$0	\$0	\$0
Professional Liability Insurance	\$6,087	\$2,000	\$0	\$0
Professional Fees	\$57,616	\$0	\$0	\$0
Supplies	\$131,291	\$12,500	\$0	\$0
General Office Costs	\$38,128	\$8,000	\$0	\$0
Occupancy	\$110,000	\$0	\$0	\$0
Marketing/Advertisi ng	\$19,546	\$0	\$0	\$0
Travel/Mileage Reimbursement	\$72,902	\$0	\$0	\$0
Specific Assistance	\$2,500	\$2,500	\$0	\$0
Dues, Fee, Other	\$31,440	\$0	\$0	\$0
TOTAL:	\$2,396,329	\$100,000	\$75,000	\$75,000
Signature			-	- I
Annette Rodriguez				