



2014-2015 NEW JERSEY BONNER AMERICORPS PROGRAM QUARTER 4

ADULT EDUCATION, JOB SKILL TRAINING, ESL ACTIVITY REPORT

Reporting Period

Q4: 06/30/2015 – 9/30/2015

Community Partner: _____

	Q4	Year End Total
# of unduplicated participants:		
# of unduplicated participants completing program:		
# of unduplicated participants who completed the GED:		
# of unduplicated participants who were placed in a job:		

Please attach:

- Completed Client Output and Outcome Log
- Copies of GED completion certificates
- Copies of job offer letter or certification of job placement from site supervisor

Certification

I certify that the attached list of individuals participated in job training/skill training programs supported by members of the New Jersey Bonner AmeriCorps Program. I certify that the individuals listed on the Client Output and Outcome Log meet the definition of economically disadvantaged as outlined by the Corporation for National and Service. If applicable, I certify the individuals listed completed the job training/skill training program as defined by our agency.

Name of Agency Site Supervisor

Signature of Agency Site Supervisor

Date