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| **PROGRAM NARRATIVE** |
| **Applicant’s Background and Experience** |
| 1. What is the Applicant’s experience with administering programs of a similar scale and scope? |
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| 1. What is the Applicant’s experience with working with Youth in a prevention capacity and Youth development programming? |
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| 1. How is your organization currently performing on any existing DFPS and/or CYD grants or contracts? In the response, address whether, over the current contract term, the organization: meets output and outcome performance measures; submits timely program reporting and billing; has or has had monitoring findings. |
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| 1. Optional: Provide Letters of Support and label as Attachment I-1 Letters of Support. |
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