

## **2001 TANF Summer Youth Program Report**

Enter the program totals according to the instructions provided. Save the form. Print a copy of the completed form and return with your final TANF Expenditure Form (3148A) and Report on TANF & TANF Maintenance of Effort Programs (DOL-4727A) by **November 15, 2002** to:

Margaret M. Moree, Director  
NYS Department of Labor  
Workforce Development and Training  
State Office Building Campus  
Building 12, Room 450  
Albany, NY 12240

**LWIA:**

**Contact Person's Name and Phone #:**

**Start and End Date of Program:**

### **Participation Summary**

- 1. Total Participants**
- 2. Total Participants in Educational Activity**
- 3. Total Participants in Wage Subsidized Employment**

### **Characteristics Summary**

- 4. Male**
- 5. Female**
- 6. Age 14-15**
- 7. Age 16-17**
- 8. Age 18**
- 9. Completed Grades 1-8**
- 10. Completed Grades 9-11**
- 11. White**
- 12. Black/Hispanic**
- 13. Indian/Native American**
- 14. Asian/Pacific Islander**
- 15. Other Race/Ethnicity**
- 16. Limited English**
- 17. Disabled Individuals**
- 18. Receiving Cash Welfare**