

DOMESTIC VIOLENCE AND SEXUAL ASSAULT SERVICE REPORTING FORM

(Due 25 Days After Close of Each Quarter, or the First Business Day, by 5:00 PM)

**FVPSA/PFA Reporting Form
Fiscal Year 2006**

Reporting Period: From _____ To _____

Subgrantee Name: _____

Grant Project Number: _____

GOV FAX: (785) 291-3204
GOV: lori.jensen@gov.state.ks.us

Name of Individual Completing Form: _____

Phone Number: _____

Total Number of Domestic Violence and Sexual Assault Victims Receiving Face-To-Face Services:

	New			Total New Victims	Continuing			Total Continuing Victims	Returning			Total Returning Victims
	Women	Children	Men		Women	Children	Men		Women	Children	Men	
Unduplicated Number												
Domestic Violence												
Sexual Assault												

Total Number of Domestic Violence and Sexual Assault Victims Receiving Shelter/Transitional Housing:

	New			Total New Victims	Continuing			Total Continuing Victims	Returning			Total Returning Victims
	Women	Children	Men		Women	Children	Men		Women	Children	Men	
Shelter												
Unduplicated Number												
Domestic Violence												
Sexual Assault												
Transitional Housing												
Unduplicated Number												
Domestic Violence												
Sexual Assault												

Total Number of Victims Sheltered:

Unduplicated Number _____
 Domestic Violence _____
 Sexual Assault _____

Total Number Referred to Another Shelter Program:

Unduplicated Number _____
 Domestic Violence _____
 Sexual Assault _____

Total Number of Shelter Units:

(each person x number of days sheltered)

Unduplicated Number _____
 Domestic Violence _____
 Sexual Assault _____

Total Number Unable to Shelter Because:

	Undup. #	DV	SA
Shelter Full			
Inappropriate Placement			
On Risk List			

DOMESTIC VIOLENCE AND SEXUAL ASSAULT SERVICE REPORTING FORM

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Total Number of Services Provided:

SERVICES									
Primary		+	Secondary		=	Total Services		Total Hours	
DV	SA		DV	SA		DV	SA	DV	SA
Counseling		+			=				
Follow-Up Contact		+			=				
Individual Therapy		+			=				
Group Treatment/Support		+			=				
Crisis Hotline Calls		+			=				
Victim-Related Calls		+			=				
Information & Referral		+			=				
Criminal Justice Advocacy		+			=				
Emergency Financial Assist.		+			=				
Civil Court Advocacy		+			=				
Compensation Claim Filings		+			=				
Personal Advocacy		+			=				
PFA Orders		+			=				
Medical		+			=				
PFS Orders		+			=				
Safety Planning		+			=				
Transportation		+			=				
Other		+			=				

Counseling Groups:

- Adult Counseling Groups
- Children's Counseling Groups

DV	SA	Total

Professional Training Provided:

- Number
- Number of Hours
- Number of Participants

Undup. #	DV	SA

Public Presentations:

- Number of Presentations
- Number of Hours
- Number of Participants

Undup. #	DV	SA

Volunteer Training Provided:

- Number
- Number of Hours
- Number of Participants

Undup. #	DV	SA

Staff Inservice Training:

- Number of Hours

DV	SA	Total

Volunteer Use:

- Number Who Worked
- Number of Hours

DV	SA	Total

DEMOGRAPHIC BREAKDOWN

FOR NEW AND RETURNING VICTIMS

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Age of Victims:

Domestic Violence
Sexual Assault

Females						Males						Total
0-12	13-17	18-24	25-40	41-59	60+	0-12	13-17	18-24	25-40	41-59	60+	

Race of Victims:

Alaskan Native
Asian
African American
Caucasian
Hispanic/Latino
Native American
Pacific Islander
Other
Total

Women		Children		Men		Total	
DV	SA	DV	SA	DV	SA	DV	SA

Residency:

In Subgrantee
Service Area
Out of Subgrantee
Service Area

Women		Children		Men		Total	
DV	SA	DV	SA	DV	SA	DV	SA

Background of Victims:

Abused as a Child
Witnessed Abuse

Women		Children		Men		Total	
DV	SA	DV	SA	DV	SA	DV	SA

Special Needs:

Physical
Pregnant
Mental Health
Undocumented
Non English-
Speaking
Other
Total

Women		Children		Men		Total	
DV	SA	DV	SA	DV	SA	DV	SA

Precipitating Incident:

Weapon
a. Gun
b. Knife
c. Body
d. Other
Alcohol/ Drug Involvement
Emergency Medical Intervention

Victim		Abuser		Both	
DV	SA	DV	SA	DV	SA

Number of Children:

Present
Physically Abused
Sexually Abused

DV	SA

Law Enforcement Intervention:

Domestic Violence
Sexual Assault

DOMESTIC VIOLENCE BATTERERS INTERVENTION AND TREATMENT

FOR
NEW AND RETURNING BATTERERS

FVPSA/PFA Reporting Form
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Age of Batterers:	Females						Males						Total
	0-12	13-17	18-24	25-40	41-59	60+	0-12	13-17	18-24	25-40	41-59	60+	
New													
Returning													

Participation Status:

Court Ordered
Voluntary

Women	Men	Total

Race of Batterers:

Alaskan Native
Asian
African American
Caucasian
Hispanic/Latino
Native American
Pacific Islander
Other
Total

Women	Men	Total

Services Provided:

Counseling
Follow-Up Contact
Individual Therapy
Group Treatment/Support
Batterer-Related Calls
Information & Referral
Other

Total Services		Total Hours

Residency:

In Subgrantee Service Area
Out of Subgrantee Service Area

Women	Men	Total

Precipitating Incidents:

Weapon
 a. Gun
 b. Knife
 c. Body
 d. Other
 Alcohol Drug Involvement
 Emergency Medical Intervention

Victim	Abuser	Both

Background of Batterers:

Abused as a Child
Witnessed Abuse

Women	Men	Total

Law Enforcement Intervention _____

Number of Children:

Present _____
 Physically Abused _____
 Sexually Abused _____

COUNTIES SERVED

VICTIMS OF DOMESTIC VIOLENCE RECEIVING SERVICES THIS REPORTING PERIOD

FVPSA/PFA Reporting Form

Fiscal Year 2006

GOV FAX: (785) 291-3204

	List Each Kansas County Served Alphabetically	Face-To-Face			Shelter									
		New	Continuing	Returning	New	Continuing	Returning							
1	_____	_____	_____	_____	_____	_____	_____							
2	_____	_____	_____	_____	_____	_____	_____							
3	_____	_____	_____	_____	_____	_____	_____							
4	_____	_____	_____	_____	_____	_____	_____							
5	_____	_____	_____	_____	_____	_____	_____							
6	_____	_____	_____	_____	_____	_____	_____							
7	_____	_____	_____	_____	_____	_____	_____							
8	_____	_____	_____	_____	_____	_____	_____							
9	_____	_____	_____	_____	_____	_____	_____							
10	_____	_____	_____	_____	_____	_____	_____							
11	_____	_____	_____	_____	_____	_____	_____							
12	_____	_____	_____	_____	_____	_____	_____							
13	_____	_____	_____	_____	_____	_____	_____							
14	_____	_____	_____	_____	_____	_____	_____							
15	_____	_____	_____	_____	_____	_____	_____							
16	_____	_____	_____	_____	_____	_____	_____							
17	_____	_____	_____	_____	_____	_____	_____							
18	_____	_____	_____	_____	_____	_____	_____							
19	Unknown	_____	_____	_____	_____	_____	_____							
20	Out of State	_____	_____	_____	_____	_____	_____							
*TOTALS:		_____	+	_____	+	_____	=	_____	+	_____	+	_____	=	_____

***Counties Served totals should equal that of Face-To-Face and Shelter totals reported on Page 1.**

SEE REVERSE SIDE FOR SEXUAL ASSAULT REPORTING

COUNTIES SERVED

VICTIMS OF SEXUAL ASSAULT RECEIVING SERVICES THIS REPORTING PERIOD

FVPSA/PFA Reporting Form

Fiscal Year 2006

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	List Each Kansas County Served Alphabetically	Face-To-Face			Shelter									
		New	Continuing	Returning	New	Continuing	Returning							
1	_____	_____	_____	_____	_____	_____	_____							
2	_____	_____	_____	_____	_____	_____	_____							
3	_____	_____	_____	_____	_____	_____	_____							
4	_____	_____	_____	_____	_____	_____	_____							
5	_____	_____	_____	_____	_____	_____	_____							
6	_____	_____	_____	_____	_____	_____	_____							
7	_____	_____	_____	_____	_____	_____	_____							
8	_____	_____	_____	_____	_____	_____	_____							
9	_____	_____	_____	_____	_____	_____	_____							
10	_____	_____	_____	_____	_____	_____	_____							
11	_____	_____	_____	_____	_____	_____	_____							
12	_____	_____	_____	_____	_____	_____	_____							
13	_____	_____	_____	_____	_____	_____	_____							
14	_____	_____	_____	_____	_____	_____	_____							
15	_____	_____	_____	_____	_____	_____	_____							
16	_____	_____	_____	_____	_____	_____	_____							
17	_____	_____	_____	_____	_____	_____	_____							
18	_____	_____	_____	_____	_____	_____	_____							
19	Unknown	_____	_____	_____	_____	_____	_____							
20	Out of State	_____	_____	_____	_____	_____	_____							
	*TOTALS:	_____	+	_____	+	_____	=	_____	+	_____	+	_____	=	_____

***Counties Served totals should equal that of Face-To-Face and Shelter totals reported on Page 1.**

SEE REVERSE SIDE FOR DOMESTIC VIOLENCE REPORTING