

**Reporting with Habitat for Humanity of Iowa AmeriCorps Program**

**How to report?:**

* Use this link to fill out [this electronic form](https://forms.office.com/Pages/ResponsePage.aspx?id=aHsmVBk3q0mZBC6YIdA2mHpTV8Q4G1tHtZVeqC6cwwlUMzVUN0pLQVc3QlFBR0NKVkI1WVJRNDYyUS4u) to answer the same questions each quarter
	+ <https://forms.office.com/Pages/ResponsePage.aspx?id=aHsmVBk3q0mZBC6YIdA2mHpTV8Q4G1tHtZVeqC6cwwlUMzVUN0pLQVc3QlFBR0NKVkI1WVJRNDYyUS4u>
* **Or** fill out the sheet on page 2 and email to Kzellmer@iowahabitat.org
* The report should be completed by the staff at the Habitat Affiliate.
* These are actual numbers. Do not round or estimate numbers.
* These numbers must be associated with AmeriCorps members or volunteers utilized (recruited or managed) by the AmeriCorps members.

**Timeline and Reporting periods:**

* **QUARTER 1**: October-December due by January 20th
* **QUARTER 2:** January-March due by April 20th
* **QUARTER 3**: April-June due by July 20th
* **QUARTER 4**: July-September due by October 20th

**Performance Measures:**

* # of **Housing units developed, repaired, or rehabilitated** (unit completed in this quarter)
* # of **safe, healthy, affordable housing units made available**
* # of **volunteers utilized** (recruited, managed by AmeriCorps members)
* # of **volunteer hours** (recruited, managed by AmeriCorps members)
* # of **AmeriCorps applications** received (not sent by AmeriCorps staff)
* # of AmeriCorps members sent on a Disaster Response with A-DRT
* # of individuals affected by disaster served - This number is disaster outside an official mission assignment with Volunteer Iowa.

**Additional Questions:**

* Do you need additional Support in any area of this program? If so, please describe in detail.
* Could you talk about a challenge or success of the program this quarter?
* Is there a link to a story from your affiliate this quarter you would like to share?

**Definitions:**

“**AMI”** is Area Median Income for the county as defined by HUD

“**New House**” is a housing unit that:

* Is 100% newly constructed
* Has been sold to a family/ individual approved in accordance with the affiliate’s selection process

“**Rehabilitated house**” is a housing unit that:

* Is acquired by the affiliate, then reconstructed or renovated by the affiliate.
* Has been sold to a family/ individual approved in accordance with the affiliate’s selection

“**Repair**” is the repair or renovation of an existing housing unit that is not owned by the affiliate:

* The housing unit is owned and inhabited by an individual/family approved in accordance with the affiliate’s board-approved selection process.
* Repairs fall under three subcategories: home preservation, critical home repairs, and weatherization.

**“Made Available”** means a unit has been developed, repaired, or rehabilitated to a state that the unit is safe, healthy, and affordable for Iowa families.

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**2021-22**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | QT 1: Sept - Nov. 30 | QT 2: Dec 1- Mar 31 | QT 3: Apr - Aug 30 | QT 4: Sept 1 - Nov. 30 |
| # of **Housing united developed or repaired** due to AmeriCorps member or their volunteer efforts. – Do not round or estimate |  |  |  |  |
| # of **safe, healthy, affordable housing units made available**.  – Do not round or estimate |  |  |  |  |
| # of **volunteer generated** (recruited, managed by AmeriCorps members) – Do not round or estimate |  |  |  |  |
| # of **volunteer hours generated** – Do not round or estimate |  |  |  |  |
| # of **AmeriCorps applications** received (not sent by AmeriCorps staff) – Do not round or estimate -Most sites will have "0" here |  |  |  |  |
| # of **AmeriCorps members** sent on a Disaster Response with A-DRT – Do not round or estimate- Most sites will have "0" here |  |  |  |  |
| # of **individuals affected by disaster served** - This number is disaster outside an official mission assignment with Volunteer Iowa. -Most sites will have "0" here |  |  |  |  |

\*Definitions located on page 1 of instructions

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| --- |
| Do you need any additional Support? Please describe |
| Could you talk about a challenge or success of the program this quarter? Is there a link to a story from your affiliate this quarter you would like to share?  |
| Any additional comments?  |

***I certify that all provided data is accurate and understand that this data is being used for performance measures on a Federal AmeriCorps grant***

Printed Name of Person Completing Report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person completing report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_