



Standing Rock Sioux Tribe

PROGRAM MONTHLY REPORT

Program: \_\_\_\_\_ Month of: \_\_\_\_\_

Director: \_\_\_\_\_ Date Submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

Prepared by: \_\_\_\_\_ Cuff Account Attached? Y \_\_\_\_ N \_\_\_\_

Committee/Council Action Needed? Y \_\_\_\_ N \_\_\_\_ (If yes, attach proposed resolution)

**Services provided (please provide workflow data, customer demographics, and deliverables):**

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**Program goals (long-term, how do these align with administration goals?):**

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**Program objectives (short-term, specific):**

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**Specific steps you are taking to achieve program goals & objectives:**

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**Current staffing information:**

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**Budgetary Information:**

Contract or Other Funding Source	Budget Amount	% Expended to Date	Frequency (FY, CY, PY)	Contract Start & End Dates

\*Attach separate sheet if necessary.

**Contract specific information:**

**Contract:** \_\_\_\_\_

Goal/Obj. 1: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Goal/Obj. 2: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Goal/Obj. 3: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Contract:** \_\_\_\_\_

Goal/Obj. 1: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Goal/Obj. 2: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Goal/Obj. 3: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

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**Contract:** \_\_\_\_\_

Goal/Obj. 1: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

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Goal/Obj. 2: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

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Goal/Obj. 3: \_\_\_\_\_

What did the program accomplish to meet this goal/objective? (include supporting data): \_\_\_\_\_

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**Are there any specific barriers preventing you from reaching your program goals?**

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**What are your plans to extend services to reach more tribal members?**

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**Program need and/or justification for action (budgetary, programmatic, policy, etc.):**

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**Proposed motion (attach reviewed resolution):**

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