

FY 2027 Instructions for Delinquency Prevention Program Summary Form

- Program Number:** Program Numbers consist of the program type (P or GS), the last 2 digits of the fiscal year (24), the 2 digit judicial district number (OX or XX) and the program number (unique to each program, assigned by KDOC from when the program is first funded); ex: P2305-2 or GS2305-1. For existing programs, the only change necessary is to reflect the fiscal year of the application. For new programs (including those that significantly change services or merge previous programs) KDOC-JS will assign a program number upon request of the Administrative Contact.
- Is this program subcontracted** State if the service is provided by the Community Supervision Agency or an organization other than the Community Supervision Agency.
- Program Population:** Select program type according to the following definitions. Check all that apply:
Note: It is possible for a program to target more than one prevention type so check all that apply and ensure the program summary clearly describes the different target populations. For example, a Mentoring program may provide secondary prevention services to at risk youth by matching to a mentor and provide the same matching service as tertiary prevention targeting youth after arrest/intake. Existing programs can continue operating as primary, secondary or tertiary prevention programs and must continue to provide the same service content and target populations. New prevention programs must be limited to tertiary prevention programs and services.
- Program Population Type:**
- Primary Prevention, A program or service directed at the population at large that is designed to prevent juvenile crime.
 - Secondary Prevention, A program or service directed to youth and families identified as at risk for juvenile crime involvement that is designed to prevent juvenile crime before it occurs.
 - Tertiary Prevention, A program or service provided to youth and families after an incident of juvenile criminal behavior has occurred. The intervention is designed to prevent future incidents from occurring.
- Geographic Area to be Served:** The geographic area(s) from which participants will be served. This might be an entire judicial district or one county in a multi-county district or one school in a school district, etc.
- Target Population:**
- Demographics, The basic demographics of the program's target population(s).
 - Eligibility Criteria, How participants are identified for the program that qualifies the program for the program type(s) selected above.
 - Referral Source(s), How are youth referred to access the program.
- Services Provided:** Clearly describe the specific day-to-day activities that will be used to achieve the goals of the program. Include where activity will be held, frequency of activities, who will be responsible for carrying out the activities and a timeline of the program (i.e. length of the program).
- Best Practices:** Please list the evidence-based and best practices utilized by the program to achieve the desired behavior change and anticipated outcome for youth. Examples include but are not limited to: behavior monitoring and reinforcement, conducting assessment of program participants, skills training, wraparound services, etc.
- Completion Criteria:** Specify the requirements and obligations the participant must meet in order to complete the program. Please include how long a participant is expected to remain in the program to meet the completion criteria.
- Last Fiscal Years Annual Evaluation:** Annual evaluation could include: Number of Youth Served (Projected vs. Actual), Progress made towards the measurable outcome (or behavioral goal) statement, Any other successes or challenges, Progress made or a summary of long-term changes data, Any other additional observations, Things to consider for the future, etc. Also a file upload has been provided as an option.
- Measurable Outcome Statement:**
- A specific statement that will allow the agency/organization to measure whether the program is effecting the desired changes in knowledge, attitude, skills or behavior that it is intended to impact. Typical measures may include participants improved performance on measurable tests or changed level of participant engagement in target behavior. Example such as (ex. In FY '27, XX % of program participants who complete the XXXX program will show (specific behavior or improvement to be measured)

Delinquency Prevention Program Summary

Program Name:

Program Number:

Is this program subcontracted to another agency/organization? Yes No

If Yes, please provide the following information:

Agency/Organization Name:	
Address 1:	
Address 2:	
City/State/Zip	
Name of Contact Person:	
Contact Person Phone:	
Contact Person Email:	

Program Population Type	Number of Youth Served in FY 2025	Number of Youth to be Served in FY 2027
Total		

What is the programs intended purpose? Only select one

- Antisocial behavior (e.g., reduced criminal activity, reduced violence, improved behavior, etc.)
- Family Relationship (e.g. improved family functioning, reduced out of home placements, reduced incidents of family violence, etc.)
- School Attendance (e.g., improved academic performance or attendance, reduced disciplinary actions/expulsions, etc.)
- Substance Abuse (e.g., reduced use of substances, education on risk of substance abuse, programming/treatment, etc.)

Geographic area to be served:

Target Population:

Demographics	
Eligibility Criteria	
Referral Source(s)	

Services Provided:

Is there a cost or fee associated with the program? ___ Yes ___ No

If Yes, please explain:

Best Practices:

Completion Criteria:

Who is responsible for annual evaluations of the program and program operations?

Name:	
Position Title:	
Contact Person Phone:	
Contact Person Email:	

Describe the process utilized for monitoring and evaluating the program.

Provide Fiscal Year 2025 Annual Evaluation (An attachment of last years evaluation can be submitted with this application or review instructions page for suggested topics and details to cover.):

Measurable Outcome Statement (goal) that will allow for the evaluation of program effectiveness.

What data will be measured to determine if the program has reached or is making progress towards its Measurable Outcome Statement (goal)?

What is the baseline? A baseline is a data reference from a previous achievement that the outcome is built upon. The baseline should be a concise measurement of the data, from the most recent complete fiscal year of data (ex. FY25), that measures the same thing the stated outcome proposes to measure in FY 2027.

Please describe any efforts within the program to address racial, ethnic, geographic, and other biases that may exist with the program.

Funding Request (This section must be completed)

	FY 2027 Category Total
Budget Category	
Agency Operations	
Client Services	
Communications	
Contractual	
Equipment	
Salary & Benefits	
Supplies	
Training	
Travel	
Total Funding Request	