THE AMERICAN LEGION
Department of Pennsylvania

CHILDREN & YOUTH NARRATIVE REPORT

(Activity must cover period May 1, 2019 through April 30, 2020)

IMPORTANT: CHILDREN & YOUTH AWARDS WILL BE BASED ON THE INFORMATION PROVIDED ON OR ATTACHED TO THIS REPORT FORM.

POST NAME_____POST NO._____

ADDRESS_____

CITY/STATE/ZIP_____

DISTRICT_____ SECTION_____MEMBERSHIP CLASS_____

MAIL TO:THE AMERICAN LEGION, PO BOX 2324, HARRISBURG, PA 17105-2324

DEADLINE: MAY 22, 2020

(A) DID YOUR POST FILE A CONSOLIDATED POST REPORT FORM? _____YES _____NO

(B) ESTIMATE THE NUMBER OF VOLUNTEER SERVICE HOURS PROVIDED BY THE MEMBERS OF YOUR POST FOR THE CHILDREN & YOUTH OF YOUR COMMUNITY. _____HOURS

PROGRAM	DID YOUR POST HAVE THIS PROGRAM (YES OR NO)	ESTIMATED NUMBER OF CHILDREN SERVED	COST TO POST
MISSING CHILDREN			
SUICIDE PREVENTION			
DRUG AND ALCOHOL ABUSE PROGRAM			
HALLOWEEN SAFETY			
CHILD SAFETY			
TEMPORARY FINANCIAL ASSISTANCE			
APRIL IS CHILDREN & YOUTH MONTH			
IMMUNIZATION PROJECT			
OTHER (Describe on reverse)			

_____ _____ _____
Signature Title Date

FOR COMMITTEE USE ONLY:

Additional Information?_____

Total Points_____