

Immigration Services Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA) Application Assistance IS-DAPA Quarterly Report

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ORGANIZATION / CONTRACTOR NAME	VERSION <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISED	REPORT QTR			REPORT YEAR
PART A. WORKSHOPS		Month 1	Month 2	Month 3	Quarter Total
1. DAPA workshops held during the quarter.....		1	2	3	4
PART B. APPLICATION ASSISTANCE		Month 1	Month 2	Month 3	Quarter Total
2. DAPA individuals screened (Workshop Service Model).....		5	6	7	8
3. Applications completed and submitted for other immigration remedies (Complex Case/Direct Representation Model with G-28 Filed; sum of Items 3a through 3g).....		9	10	11	12
a. U-Visa.....		13	14	15	16
b. T-Visa.....		17	18	19	20
c. Violence Against Women Act (VAWA) self-petitions.....		21	22	23	24
d. Family-based petitions.....		25	26	27	28
e. Asylum.....		29	30	31	32
f. Special Immigrant Juvenile Status (SIJS).....		33	34	35	36
g. Other remedies for which DAPA applicants may qualify (Specify in the Item 3g Other Remedies Explanation box).....		37	38	39	40
4. DAPA candidate's racial/ethnic identity <i>Count each applicant in one item only. (Sum of Items 4a through 4v; automatically calculated for editing purposes)</i>					Quarter Total
a. American Indian or Alaska Native.....					41
b. Asian Indian.....					42
c. Black or African American (Hispanic or Latino).....					43
d. Black or African American (non-Hispanic or Latino).....					44
e. Cambodian.....					45
f. Chinese.....					46
g. Filipino.....					47
h. Guamanian.....					48
i. Hmong.....					49
j. Indigenous - Latin America (Specify the communities in the Item 4j Indigenous - Latin America Communities Explanation box).....					50
k. Japanese.....					51
l. Korean.....					52
m. Laotian.....					53
n. Native Hawaiian.....					54
o. Vietnamese.....					55
p. Other Asian.....					56
q. Samoan.....					57
r. White (Hispanic or Latino).....					58
s. White (non-Hispanic or Latino).....					59
t. Hispanic or Latino (any other race).....					60
u. More than one of the above.....					61
v. Other (Specify in Item 4v Other Race/Ethnicity Explanation box).....					62

		Quarter Total
5.	Language in which service was provided to DAPA candidate <i>Count each applicant in one item only.</i>	
	<i>(Sum of Items 5a through 5aq; automatically calculated for editing purposes)</i>	
a.	American Sign Language.....	63
b.	Amharic.....	64
c.	Arabic.....	65
d.	Armenian.....	66
e.	Assyrian.....	67
f.	Cambodian.....	68
g.	Cantonese.....	69
h.	English.....	70
i.	Farsi.....	71
j.	French.....	72
k.	Hebrew.....	73
l.	Hindi.....	74
m.	Hmong.....	75
n.	Ilocano.....	76
o.	Italian.....	77
p.	Japanese.....	78
q.	Kanjobal.....	79
r.	Korean.....	80
s.	Lao.....	81
t.	Mam.....	82
u.	Mandarin.....	83
v.	Mien.....	84
w.	Mixteco.....	85
x.	Pashtu.....	86
y.	Polish.....	87
z.	Portuguese.....	88
aa.	Punjabi.....	89
ab.	Romanian.....	90
ac.	Russian.....	91
ad.	Samoan.....	92
ae.	Spanish.....	93
af.	Tagalog.....	94
ag.	Thai.....	95
ah.	Tigrigna.....	96
ai.	Turkic.....	97
aj.	Turkish.....	98
ak.	Triqui.....	99
al.	Urdu.....	100
am.	Vietnamese.....	101
an.	Zapoteco.....	102
ao.	Other Chinese Languages (Specify in Item 5ao Other Chinese Languages Explanation box.....	103
ap.	Other Non-English (Specify in Item 5ap Other Non-English Explanation box).....	104
aq.	Other Sign Language (Specify in Item 5aq Other Sign Language Explanation box.....	105

6. DAPA candidate's country of origin		Quarter Total
<i>Count each applicant in one item only.</i>		
<i>(Sum of Items 6a through 6ab; automatically calculated for editing purposes)</i>		
a.	Afghanistan.....	106
b.	Armenia.....	107
c.	Bangladesh.....	108
d.	Brazil.....	109
e.	Cambodia.....	110
f.	China, People's Republic.....	111
g.	Colombia.....	112
h.	Egypt.....	113
i.	El Salvador.....	114
j.	Ethiopia.....	115
k.	Guatemala.....	116
l.	India.....	117
m.	Iran.....	118
n.	Iraq.....	119
o.	Korea, South.....	120
p.	Laos.....	121
q.	Mexico.....	122
r.	Nicaragua.....	123
s.	Pakistan.....	124
t.	Peru.....	125
u.	Philippines.....	126
v.	Russia.....	127
w.	Taiwan.....	128
x.	Thailand.....	129
y.	Ukraine.....	130
z.	Vietnam.....	131
aa.	Unknown.....	132
ab.	Other (Specify in the Item 6ab Other Country of Origin Explanation box).....	133
		Quarter Total
7. DAPA candidate's gender		
<i>Count each applicant in one item only.</i>		
<i>(Sum of Items 7a through 7d; automatically calculated for editing purposes)</i>		
a.	Male.....	134
b.	Female.....	135
c.	Transgender.....	136
d.	Do not identify as female, male or transgender.....	137
		Quarter Total
8. DAPA candidate's age		
<i>Count each applicant in one item only.</i>		
<i>(Sum of Items 8a through 8e; automatically calculated for editing purposes)</i>		
a.	Youth (0-14).....	138
b.	Youth (15-17).....	139
c.	Young Adults (18-30).....	140
d.	Adults (31-49).....	141
e.	Adults (50+).....	142
		Quarter Total
9. DAPA candidate's highest level of educational attainment		
<i>Count each applicant in one item only.</i>		
<i>(Sum of Items 9a through 9f; automatically calculated for editing purposes)</i>		
a.	None or did not complete primary school.....	143
b.	Completed primary school.....	144
c.	Completed secondary school.....	145
d.	Some college.....	146
e.	Completed college.....	147
f.	Completed graduate school.....	148

		Quarter Total
10.	DAPA candidate's county of residence at time of service <i>Count each applicant in one item only.</i>	
	<i>(Sum of Items 10a through 10bf; automatically calculated for editing purposes)</i>	
a.	Alameda.....	149
b.	Alpine.....	150
c.	Amador.....	151
d.	Butte.....	152
e.	Calaveras.....	153
f.	Colusa.....	154
g.	Contra Costa.....	155
h.	Del Norte.....	156
i.	El Dorado.....	157
j.	Fresno.....	158
k.	Glenn.....	159
l.	Humboldt.....	160
m.	Imperial.....	161
n.	Inyo.....	162
o.	Kern.....	163
p.	Kings.....	164
q.	Lake.....	165
r.	Lassen.....	166
s.	Los Angeles.....	167
t.	Madera.....	168
u.	Marin.....	169
v.	Mariposa.....	170
w.	Mendocino.....	171
x.	Merced.....	172
y.	Modoc.....	173
z.	Mono.....	174
aa.	Monterey.....	175
ab.	Napa.....	176
ac.	Nevada.....	177
ad.	Orange.....	178
ae.	Placer.....	179
af.	Plumas.....	180
ag.	Riverside.....	181
ah.	Sacramento.....	182
ai.	San Benito.....	183
aj.	San Bernardino.....	184
ak.	San Diego.....	185
al.	San Francisco.....	186
am.	San Joaquin.....	187
an.	San Luis Obispo.....	188
ao.	San Mateo.....	189
ap.	Santa Barbara.....	190
aq.	Santa Clara.....	191
ar.	Santa Cruz.....	192
as.	Shasta.....	193
at.	Sierra.....	194
au.	Siskiyou.....	195
av.	Solano.....	196
aw.	Sonoma.....	197
ax.	Stanislaus.....	198
ay.	Sutter.....	199
az.	Tehama.....	200
ba.	Trinity.....	201
bb.	Tulare.....	202
bc.	Tuolumne.....	203
bd.	Ventura.....	204
be.	Yolo.....	205
bf.	Yuba.....	206

PART C. ORGANIZATIONAL PRACTICES	
11. What challenges or barriers were discovered during the quarter?	207
12. What key lessons and/or promising practices emerged during the quarter?	208
13. Number of CDSS contractors that your organization collaborated with during the quarter <i>(Sum of Items 13a through 13o; automatically calculated for editing purposes. This total does not include any additional contractors entered in the Item 13 Additional CDSS Contractor Collaborations box in the Comments section.)</i>	<input style="width: 50px; height: 20px;" type="text"/>
13a. If your organization collaborated with another CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	209
13b. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	210
13c. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	211
13d. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	212
13e. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	213
13f. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	214
13g. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	215
13h. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	216
13i. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	217
13j. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	218
13k. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	219
13l. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	220
13m. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	221
13n. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	222
13o. If your organization collaborated with an additional CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration	223

COMMENTS

Item 3g Other Remedies Explanation

If Item 3g (Cell 40) is not zero, this box must be completed. If Item 3g (Cell 40) is zero, this box must be blank.

Item 4j Indigenous - Latin America Communities Explanation

If Item 4j (Cell 50) is not zero, this box must be completed. If Item 4j (Cell 50) is zero, this box must be blank.

Item 4v Other Race/Ethnicity Explanation

If Item 4v (Cell 62) is not zero, this box must be completed. If Item 4v (Cell 62) is zero, this box must be blank.

Item 5ao Other Chinese Languages Explanation

If Item 5ao (Cell 103) is not zero, this box must be completed. If Item 5ao (Cell 103) is zero, this box must be blank.

Item 5ap Other Non-English Explanation

If Item 5ap (Cell 104) is not zero this box must be completed. If Item 5ap (Cell 104) is zero this box must be blank.

Item 5aq Other Sign Language Explanation

If Item 5aq (Cell 105) is not zero this box must be completed. If Item 5aq (Cell 105) is zero, this box must be blank.

Item 6ab Other Country of Origin Explanation

If Item 6ab (Cell 133) is not zero this box must be completed. If Item 6ab (Cell 133) is zero, this box must be blank.

Item 13 Additional CDSS Contractor Collaborations Explanation (Continuation of Items 13a - 13o if needed)

If your organization did not collaborate with 16 or more CDSS contractors, this box must be blank.

General Comments

Revised Report Explanation

*If this is a Revised report, this box must be completed. If this is an Initial report, this box must be blank.***CONTACT INFORMATION****CERTIFICATION***I hereby certify that all information reported on this form during this period is consistent with the intent and provisions of the approved Agreement between CDSS and the above-named Contractor.*

CONTACT PERSON

TELEPHONE

EXTENSION

JOB TITLE/CLASSIFICATION

E-MAIL

DATE SUBMITTED

**IMMIGRATION SERVICES
DEFERRED ACTION FOR PARENTS OF AMERICANS AND
LAWFUL PERMANENT RESIDENTS (DAPA)
APPLICATION ASSISTANCE QUARTERLY REPORT
IS-DAPA (1/16)**

INSTRUCTIONS

CONTENT

The quarterly IS-DAPA report contains statistical information for the Immigration Services Funding - Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA) Application Assistance service during the reporting quarter. The data requested refers to information about services to assist individuals with DAPA applications including the number and type of application services received, workshops and demographic information. The report also collects qualitative data on contractor practices, referrals and organizational collaborations.

PURPOSE

The purpose of the IS-DAPA report is for the California Department of Social Services (CDSS) contractors to provide information regarding their provision of DAPA Application Assistance. Effective January 1, 2016, DAPA Application Assistance is a component of the new Immigration Services Funding, which provides grants to nonprofit organizations meeting the criteria set forth in Senate Bill 79, Welfare & Institutions Code Sections 13302 - 13306 (Chapter 5.6, Statutes of 2015). This report provides the State with information needed for budgeting, staffing and program planning.

Due to the court-ordered injunction, the USCIS has been ordered to put the DAPA application program on hold. Under the CDSS program, DAPA candidates will still be provided services to screen for and assist with other immigration remedies for which they may be eligible. These candidates are referred to as "DAPA applicants" in the reporting form. DAPA application services will be limited to screening, document gathering, submitting Freedom of Information Act (FOIA) requests, assisting with other immigration remedies, among other listed activities. This category of services may need a Standard Agreement amendment in the event the injunction is lifted during the Standard Agreement term and contractor seeks to modify services to assist with DAPA applications.

COMPLETION AND SUBMISSION

Each contractor is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the contracting organization, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal.

Quarter	Service Period	Report Due Date
Q1	January 1, 2016 – March 31, 2016	04/15/2016
Q2	April 1, 2016 – June 30, 2016	07/15/2016
Q3	July 1, 2016 – September 30, 2016	10/14/2016
Q4	October 1, 2016 – December 31, 2016	01/13/2017
Q5	January 1, 2017 – March 31, 2017	04/14/2017
Q6	April 1, 2017 – June 30, 2016	07/14/2017

COMPLETION AND SUBMISSION (Continued)

Download an Excel version of the report form from <http://www.cdss.ca.gov/dssdb/>, complete the downloaded form, and e-mail the form to CDSS, Data Systems and Survey Design Bureau (DSSDB) at admisdapa@dss.ca.gov. The electronic submission process contains automatic computations of some cells and provides for the e-mail transmission of completed forms to DSSDB. The website contains specific instructions and guidance. If you have questions regarding the completion or submission of this report, contact DSSDB at (916) 651-8269.

REVISIONS AND SUBMISSION

If the contractor determines that a revision is needed to a previously submitted report, the contractor shall submit a revised report for the applicable quarter(s) **within 30 days of the reporting due date** and provide an explanation for the revision in the Revised Report Explanation box located at the end of the reporting form. For revisions to be submitted **after the 30 day limit**, contact the Immigration Branch at ImmigrationServices@dss.ca.gov to request approval for revision submission. Revisions received after 30 days will be accepted on a case-by-case basis and will be given further instruction.

GENERAL INSTRUCTIONS

Enter the contracting organization's name, version (Initial or Revised) and the report quarter and year in the boxes provided near the top of the form. Enter the **unique and unduplicated client counts** required for each item **at the time of application completion**. Enter "0" if there is nothing to report for an item. **Do not leave any items blank unless otherwise noted.**

As a reminder, the documents listed below are required to be maintained by the contractor. However, much of data required in this report can be found on the USCIS application. Per the Standard Agreement, Exhibit A - Terms and Conditions Part C, evidence of services performed includes, but is not limited to:

Intake forms, screening services, workshops, education and outreach event records, materials from webinars and in-person trainings. For application assistance services, contractor shall retain records of workshop participants, such as sign-in sheets and intake forms explaining the service provided. For direct representation services, contractor shall also maintain receipt notices for applications submitted to USCIS, and copies of G-28 entry of appearance forms. For education and outreach, contractor shall retain records of education and outreach activities and people reached, such as event fliers, sign-in sheets, evaluation forms, referrals to application assistance providers, letters from host organizations confirming number of attendees, receipts for expenses related to venue and travel costs, social media announcements, media reports, etc.

Enter in the boxes at the bottom of the form the name, job title or classification, telephone number, extension and e-mail address of the person to contact if there are questions about the report. This contact person may or may not be the person who completed the report. Enter the date the report was submitted. This is the date when the report is e-mailed to DSSDB.

DEFINITIONS

The following definitions are to be used when completing the IS-DAPA report form.

Complex Case: Direct representation that requires extensive legal analysis of qualifying criteria, resolution of complex barriers (such as disability waivers, criminal issues, long absences, complicated immigration history or other factors) or representation before the USCIS or in State Court solely as it pertains to Special Immigrant Juvenile Status (SIJS). Complex cases shall not include cases that are time consuming due to an applicant's language, literacy barriers nor due to an applicant's trouble recalling information.

Contractor: An applicant selected to enter into an agreement with CDSS to provide services pursuant to the Request for Application (RFA) and to comply with the terms and conditions set forth in the Standard Agreement. The contractor shall be a nonprofit organization as specified in statutory requirements.

Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA): Allows parents of U.S. citizens and lawful permanent residents to request deferred action and employment authorization for three years.

Direct Representation: Legal representation that is provided by a Board of Immigration Appeals (BIA) accredited representative or attorney for a complex case, defined above and not handled in a workshop setting.

"Other Immigration Remedies": Remedies that may be available to individuals seeking DACA or DAPA status that include, but are not limited to: U-Visa, T-Visa, SIJS, Violence Against Women Act (VAWA) self-petitions, family-based petitions, asylum or other remedies for which DACA or DAPA applicants may qualify.

Workshops: Community events to assist individuals in a group setting with eligibility screening, document assembly and application assistance.

COLUMN INSTRUCTIONS

Column Month 1: Enter the data for the first month of the applicable quarter.

Column Month 2: Enter the data for the second month of the applicable quarter.

Column Month 3: Enter the data for the third month of the applicable quarter.

Column Quarter Total: It is the sum of Columns Month 1, Month 2 and Month 3.

ITEM INSTRUCTIONS

Direct service contractors often utilize a workshop model that begins with an informational workshop that offers legal information and an overview of the relevant immigration or naturalization application, followed by another workshop where individual application assistance is provided by qualified legal services providers. Part A captures the number of DAPA workshops held during the reporting period. Part B captures demographic data for DAPA workshop application assistance participants.

PART A. WORKSHOPS

For Part A provide the number of DAPA workshops held in the reporting period.

1. DAPA workshops held during the quarter: Enter the number of DAPA workshops that were held in each month during the quarter. **Cell 4 Quarter Total is automatically calculated.** [Cells 1-4]

ITEM INSTRUCTIONS (Continued)**PART B. APPLICATION ASSISTANCE**

Part B summarizes and captures demographic data for DAPA applicants counted under Part B. Items 2 – 3 of the report form. For each individual, information on race/ethnicity, language in which service was provided, country of origin, gender, age, educational attainment and county of residence is reported. For each reporting demographic, enter the data for each individual **at the time of application completion**. The total client counts in Items 4 - 10. may differ from the total client counts in Part B, Items 2 - 3.

2. DAPA individuals screened (Workshop Service Model): Enter the unique and unduplicated number of individuals screened for DAPA assistance. In the workshop context, DAPA assistance means that an individual DAPA-candidate was assisted with eligibility screening for other immigration remedies, document assembly and consultation by a qualified immigration service provider. *The demographic data for individuals counted in this section will be reported in Part B, Items 4 - 10. **Cell 8 Quarter Total is automatically calculated.** [Cells 5-8]*
3. Applications completed and submitted for other immigration remedies (Complex Case/Direct Representation Model with G-28 filed; Sum of Items 3a through 3g): ***This item is automatically calculated.*** [Cells 9-12]
 - a. U-Visa: Enter the unique and unduplicated number of U-Visa applications completed and submitted to USCIS in each month during the quarter. ***Cell 16 Quarter Total is automatically calculated.*** [Cells 13-16]
 - b. T-Visa: Enter the unique and unduplicated number of T-Visa applications completed and submitted to USCIS in each month during the quarter. ***Cell 20 Quarter Total is automatically calculated.*** [Cells 17-20]
 - c. Violence Against Women Act (VAWA) self-petitions: Enter the unique and unduplicated number of VAWA self-petition applications completed and submitted to USCIS in each month during the quarter. ***Cell 24 Quarter Total is automatically calculated.*** [Cells 21-24]
 - d. Family-based petitions: Enter the unique and unduplicated number of family-based petition applications completed and submitted to USCIS in each month during the quarter. ***Cell 28 Quarter Total is automatically calculated.*** [Cells 25-28]
 - e. Asylum: Enter the unique and unduplicated number of asylum applications completed and submitted to USCIS in each month during the quarter. ***Cell 32 Quarter Total is automatically calculated.*** [Cells 29-32]
 - f. Special Immigrant Juvenile Status (SIJS): Enter the unique and unduplicated number of SIJS applications completed and submitted to USCIS in each month during the quarter. ***Cell 36 Quarter Total is automatically calculated.*** [Cells 33-36]
 - g. Other remedies for which DAPA applicants may qualify (Specify in Item 3g Other Remedies Explanation box): Enter the unique and unduplicated number of other immigration remedy applications completed and submitted to USCIS in each month during the quarter. Specify which other remedy in the Item 3g Explanation box. ***Cell 40 Quarter Total is automatically calculated.*** [Cells 37-40]

ITEM INSTRUCTIONS (Continued)

4. DAPA candidate's racial/ethnic identity: This is the sum of Items 4a through 4v. ***This sum is automatically calculated for editing purposes.*** [No cell]

4a – 4v.

Enter the unique and unduplicated number of DAPA applicants who identify with each of the racial/ethnic categories listed. Count each candidate in one item only. If any individuals are counted in the “Indigenous - Latin America” category (which includes but is not limited to: Mixteco, Triqui, Zapoteco, Mam and Kanjobal), specify the community in the Item 4j Explanation box near the bottom of the form. If any individuals are counted in the Item 4v “Other” category, specify the category in the Item 4v Explanation box near the bottom of the form. This number is a quarterly total for all individuals served in months 1, 2 and 3. These categories are adapted from U.S. Census Bureau standards. [Cells 41-62]

5. Language in which service was provided to DAPA candidate: This is the sum of Items 5a through 5aq. ***This sum is automatically calculated for editing purposes.*** [No cell]

5a - 5aq.

Enter the unique and unduplicated number of DAPA applicants who were provided services in each of the language categories listed. Count each candidate in one item only. If any individuals are counted in the Item 5ao “Other Chinese Languages” specify the Chinese language in the Item 5ao Explanation box near the bottom of the form. If any individuals are counted in Item 5ap “Other Non-English” specify the Non-English language in the Item 5ap Explanation box near the bottom of the form. If any individuals are counted in Item 5aq “Other Sign Language” specify the sign language in the Item 5aq Explanation box near the bottom of the form. This number is a quarterly total for all individuals served in months 1, 2 and 3. Language categories based on most common language(s) spoken in each country listed in Item 6 as identified by the Central Intelligence Agency's World Factbook (<https://www.cia.gov/library/publications/resources/the-world-factbook/>). [Cells 63-105]

6. DAPA candidate's country of origin: This is the sum of Items 6a through 6ab. ***This sum is automatically calculated for editing purposes.*** [No cell]

6a - 6ab.

Enter the unique and unduplicated number of DAPA applicants from each of the countries listed. Count each candidate in one item only. If any individuals are counted in the Item 6ab “Other” category, list the applicable countries in the Item 6ab Explanation box near the bottom of the form. This number is a quarterly total for all individuals served in months 1, 2 and 3. Country of origin categories are based on California's most common sending countries as identified in the Department of Homeland Security's 2013 Yearbook of Immigration Statistics, Supplemental Table 1 (<http://www.dhs.gov/yearbook-immigration-statistics>). [Cells 106-133]

7. DAPA candidate's gender: This is the sum of Items 7a through 7d. ***This sum is automatically calculated for editing purposes.*** [No cell]

7a - 7d.

Enter the unique and unduplicated number of DAPA applicants who identify with each of the gender categories listed. Count each candidate in one item only. This number is a quarterly total for all individuals served in months 1, 2 and 3. Gender categories are adapted from the UCLA Williams Institute's “Best Practices for Asking Questions to Identify Transgender and Other Gender Minority Respondents on Population-Based Surveys” (2014; <http://williamsinstitute.law.ucla.edu/research/census-lgbt-demographics-studies/geniuss-report-sept-2014/>). [Cells 134-137]

ITEM INSTRUCTIONS (Continued)

8. DAPA candidate's age: This is the sum of Items 8a through 8e. ***This sum is automatically calculated for editing purposes.*** [No cell]

8a – 8e.

Enter the unique and unduplicated number of DAPA applicants who fall within each of the age ranges listed. Count each candidate in one item only. This number is a quarterly total for all individuals served in months 1, 2 and 3. [Cells 138-142]

9. DAPA candidate's highest level of educational attainment: This is the sum of Items 9a through 9f. ***This sum is automatically calculated for editing purposes.*** [No cell]

9a - 9f.

Enter the unique and unduplicated number of DAPA applicants who fall within each of the educational attainment categories listed. Count each candidate in one item only. This number is a quarterly total for all individuals served in months 1, 2 and 3. [Cells 143-148]

10. DACA candidate's county of residence at time of service: This is the sum of Items 10a through 10bf. ***This sum is automatically calculated for editing purposes.*** [No cell]

10a -10bf.

Enter the unique and unduplicated number of DAPA applicants who were residing in each of the counties listed at the time services were provided to that individual. Count each candidate in one item only. This number is a quarterly total for all individuals served in months 1, 2 and 3. [Cells 149-206]

PART C. ORGANIZATIONAL PRACTICES

Part C captures qualitative information regarding organizational practices during the quarter. This includes challenges or barriers to providing services, key lessons learned and/or promising practices and collaborative efforts with other CDSS contractors.

11. What challenges or barriers were discovered during the quarter?: Enter brief descriptions of any challenges or barriers to providing services identified by your organization during the quarter. [Cell 207]
12. What key lessons and/or promising practices emerged during the quarter?: Enter brief descriptions of any key lessons learned and/or promising practices identified by your organization during the quarter. [Cell 208]
13. Number of CDSS contractors that your organization collaborated with during the quarter: This is the sum of Items 13a through 13o. This total does not include any additional contractors entered in the Item 13 Additional CDSS Contractor Collaborations box. ***This total is automatically calculated for editing purposes.*** [No cell]

13a - 13o.

If your organization collaborated with another CDSS contractor during the quarter, select contractor from drop-down menu and briefly describe the type of collaboration: If your organization collaborated with one or more CDSS contractor(s) during the quarter, use Items 13a -13o to list each additional contractor and provide brief descriptions of the collaborative effort(s). If your organization collaborated with more than 15 CDSS contractors during the quarter, use the Item 13 Additional CDSS Contractor Collaborations Explanation box near the bottom of the form to list any additional contractors and provide accompanying descriptions. [Cells 209-223]

COMMENTS

Item 3g Other Remedies Explanation: Use this box to specify other remedies for which DAPA individuals may qualify.

Item 4j Indigenous – Latin America Communities Explanation: Use this box to specify any individuals counted in the Indigenous - Latin America category (which includes but is not limited to: Mixteco, Triqui, Zapoteco, Mam and Kanjobal) in Item 4.

Item 4v Other Race/Ethnicity Explanation: Use this box to specify any individuals counted in the “Other” category in Item 4.

Item 5ao Other Chinese Languages Explanation: Use this box to specify any individuals counted in the other Chinese languages category in Item 5.

Item 5ap Other Non-English Explanation: Use this box to specify any individuals counted in the other Non-English languages category in Item 5.

Item 5aq Other Sign Language Explanation: Use this box to specify any individuals counted in the other Sign language category in Item 5.

Item 6ab Other Country of Origin Explanation: Use this box to specify any individuals counted in the “Other” category in Item 6.

Item 13 Additional CDSS Contractor Collaborations Explanation: Use this box to list additional CDSS contractors if your organization collaborated with more than 15 contractors and describe the type of collaboration(s).

General Comments: Use this box to explain any major fluctuations in data and provide any comments your organization determines necessary, including major changes in procedures, programming or staffing that have affected the data. This box may be left blank if there are no applicable comments for the report quarter.

Revised Report Explanation: Use this box to explain the reason for a revised report. If the report is an Initial report (the first report submitted for the report quarter) this box must be blank.

Immigration Services

Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA)

Application Assistance

IS-DAPA Quarterly Report

VALIDATIONS

CELLS 1 – 223 Each data cell in this report that requires a number entry must be a whole number equal to or greater than zero (0). Enter no decimals. Data cells should not be left blank except cells 209-223 (Item 13), if necessary.

Initial reports: If "Initial" is selected, the "Revised Report Explanation" box near the bottom of the report form must be left blank.

Revised reports: If "Revised" is selected, enter the reasons for the revision in the "Revised Report Explanation" box near the bottom of the report form.

PART A. WORKSHOPS

ITEM 1 Item 1 Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 4 Cell 4 must be equal to (Cell 1 plus Cell 2 plus Cell 3)

PART B. APPLICATION ASSISTANCE

ITEM 2 Item 2 Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 8 Cell 8 must be equal to (Cell 5 plus Cell 6 plus Cell 7)

ITEM 3 Item 3 must be equal to (Item 3a plus 3b plus 3c plus 3d plus 3e plus 3f plus 3g)

CELL 9 Cell 9 must be equal to (Cell 13 plus Cell 17 plus Cell 21 plus Cell 25 plus Cell 29 plus Cell 33 plus Cell 37)

CELL 10 Cell 10 must be equal to (Cell 14 plus Cell 18 plus Cell 22 plus Cell 26 plus Cell 30 plus Cell 34 plus Cell 38)

CELL 11 Cell 11 must be equal to (Cell 15 plus Cell 19 plus Cell 23 plus Cell 27 plus Cell 31 plus Cell 35 plus Cell 39)

CELL 12 Cell 12 must be equal to (Cell 16 plus Cell 20 plus Cell 24 plus Cell 28 plus Cell 32 plus Cell 36 plus Cell 40)

ITEM 3a Item 3a Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 16 Cell 16 must be equal to (Cell 13 plus Cell 14 plus Cell 15)

ITEM 3b Item 2b Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 20 Cell 20 must be equal to (Cell 17 plus Cell 18 plus Cell 19)

ITEM 3c Item 2c Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 24 Cell 24 must be equal to (Cell 21 plus Cell 22 plus Cell 23)

ITEM 3d Item 2d Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 28 Cell 28 must be equal to (Cell 25 plus Cell 26 plus Cell 27)

ITEM 3e Item 2e Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 32 Cell 32 must be equal to (Cell 29 plus Cell 30 plus Cell 31)

ITEM 3f Item 2f Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 36 Cell 36 must be equal to (Cell 33 plus Cell 34 plus Cell 35)

ITEM 3g Item 2f Quarter Total must be equal to (Month 1 plus Month 2 plus Month 3)

CELL 40 Cell 40 must be equal to (Cell 37 plus Cell 38 plus Cell 39)