Withdrawal/Redaction Sheet
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. report	[Personally Identifiable Information] [partial] (12 pages)	03/14/1996	b(6)

COLLECTION:
Clinton Presidential Records
AmeriCorps
General Files
OA/Box Number: 24240

FOLDER TITLE:
USDA/AmeriCorps-Clinton Library Copies-FY96 4th Quarter Progress Reports-PA-TN [Pennsylvania-Tennessee] [5]

2013-0661-F
rs3829

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

OK

AmeriCorps *USA

USDA State Progress Report
(CNS Grant No. 95ADFDC047)

1. **Check this reporting period:** o First (10/1 - 12/31) XX Second (1/1 - 3/31) o Third (4/1 - 6/30) o Fourth (7/1 - 9/30)

SECTION I - STATE INFORMATION

2. **State:** South Carolina

3. **Agency:** ARS o NRCS o Forest Service o RECD o FSA XX FCS o

SECTION II - STATE CONTACT INFORMATION:
(Make Corrections if Necessary)

4. **Contact Name:** — Robert Eaddy _____
Last

5. **Title:** FSA

6. **Address:** 1927 Thurmond Mall, Suite 100
street, number, and PO (if applicable)

Columbia SC 29201
City **State** **Zip**

7. **Telephone number:** 803 - 765 - 5429

8. **Fax number:** 803 - 765 - 5156

9. **E-Mail Address (if any) :** n/a

SECTION III - MEMBER DATA:

9. Attached are sheets concerning AmeriCorps Member data. The first type of Member Data sheet lists each Member, by operating site, for whom the USDA Office of National Service has received at least a Member enrollment form. The sheet will also list the number of slots allotted to that site and the number of enrollment forms received by the Department; you will need to fill in the number of Members actually enrolled. The sheets give the Member's name, social security number, and enrollment status. Please review the data and check for:

a. Correct spelling of the name;

b. Accuracy of the Social Security Number;

c. Service type (F= Full-time member; P= Part-time member);

d. Program Status (A = Active; C = Completed; E = Ended Service Early)*

e. Trust Status (A = Earning Award; B = Earned Award; C = Did Not Earn Award; D = On Hold by the Corporation for National Service; E = Under Review).

Alongside each name, give the total number of hours served (includes training time) by the Member this reporting period. Do this even if the Member has terminated during the reporting period. For Members who are on the list but have terminated or had their service type or status changed, just cross out the old status and print the new one alongside it. Make your corrections directly on this sheet and submit it along with the other portions of your progress report.

The second type of Member Data sheets give an Operating Site ID number and the name of the site supervisor but has no Member names listed. That is because the USDA Office of National Service has not received Enrollment forms for **any** Members from these sites. Please print the necessary information for each member on the appropriate sheet and submit an Enrollment form to the Department. If a Member began service but terminated, we still need a form for that person --- indicates their status as terminated. Also note whether or not the site sent the enrollment form directly to the Corporation for National Service. It is hoped that by now everyone understands that all forms (except health and child care) should come directly to the USDA Director of National Service and NOT--- repeat NOT --- the Corporation for National Service.

REMEMBER:

a. ALL members should be listed even though they only served a few days. If an enrollment form was submitted for a Member who then terminates either by officially notifying you or simply by walking away from the program, an End of Term of Service Form MUST be submitted for the Member.

b. If Members are serving at an operating site and their name does not appear on the list for that site, first check to see if the Member is listed under a different operating site; if not, then an Enrollment Form must be submitted so the person can be enrolled in the program.

c. List all the hours a Member served during the reporting period regardless if they terminated or if they started in the middle of the period.

Withdrawal/Redaction Marker
Clinton Library

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C. Closed in accordance with restrictions contained in donor's deed of gift.
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b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

3/14/96

10. MEMBER DATA:

OP SITE ID: T45A

Site Supervisor: John Rogers

Agency/Org Name: Florence County FSA Office

City: Florence , SC

STATE: SC

PHONE: 803 ~~665-8284~~ 669-9686

FAX: 8036658284

No. of Members Allocated by USDA: 5

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total	
CARTER	, JOHN	M.	(b)(6)	F	~~A~~ E	~~A~~ C	544	416			960	~~544~~
GREEN	, AUDREY	T.		F	A	A	560	400			960	~~560~~
HALL	, ANNIE	.		F	A	A	560	400			960	~~560~~
TANNER, JR	, HAROLD	F.		F	A	A	400	400			800	~~400~~
WHITE	, CARRIE	L.		F	A	A	480	400			880	~~480~~

3/14/96

10. MEMBER DATA:

OP SITE ID: T45A

Site Supervisor: John Rogers

PHONE: 803-~~665-8284~~ 669-9686

Agency/Org Name: Florence County FSA Office

FAX: 8036658284

STATE: SC

City: Florence , SC

No. of Members Allocated by USDA: 5

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
								Total Hours:	2544

No. of Members Allocated by USDA: 5

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations): 5

No. of Members for Whom Forms Have NOT Been Recieved*: 0

ENTER the number of vacancies that you intend to fill in the next reporting period: 0

ENTER the number of vacancies you intend to relinquish for the program year: 1

* If the number of Members allocated is greater than the number of forms received, there are four options: 1. There are Members enrolled in programs whose forms have not been submitted to the USDA Director of National Service. If that is the case, list the names, SSN, Status and hours of the missing members on the back of this sheet and send the enrollment forms to the USDA Director of National Service. 2. The enrollment forms were sent directly to the Corporation. If that is the case, send copies to the USDA Director of National Service immediately. 3. There are vacancies in your program you intend to fill in the next reporting period. If that is the case, enter the number of vacancies on the appropriate line. 4. There are vacancies that you can not fill and you are relinquishing them.

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

If the number of members for whom forms have been received is greater than the number of members allocated resulting in a negative number appearing in the "No. of Members for Whom Forms Have NOT Been Received" line, you have enrolled more members in your program than authorized. Please explain this over enrollment. It may be that some members have terminated, in which case, change their status on this form and submit the proper end of term of service form to the USDA Director of National Service.

11. Please list the total number of **volunteers** who took part in activities which were sponsored or organized by all the Members in the state during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
12	16			

12. Please list the total number of hours of community service completed by the volunteers cited above during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
80	106			

SECTION IV - PROGRESS TOWARDS ACCOMPLISHING SERVICE OBJECTIVES:

13. Original Community Service Objectives: Attached are sheets summarizing the community service objectives that were originally approved for each operating site. In cases where a single objective may take an entire year to complete, that objective may have a sub-objectives listed. **You need to fill in the column marked "1st QTR Quantity" and the column marked "1st QTR Success" --- as well as any column that is blank, has a zero, or has a question mark --- for EVERY operating site.** Each chart should have the following columns:

"State" - The standard two-letter code for your state

"Obj No" - Each community service objective for each site is assigned an individual number

"Op Site" - Each site's unique operating site identification

"PGM Code" - Each type of service has been assigned a unique code to describe that type of service. See the appendix to this report entitled "Community Service PGM Code List"

"Obj/Impact Statement" - A few words verbally summarizing the community service objective

"Year's QTY Target" - The year's numerical goal for the people or things to be aided

"Target Unit of Measurement" - The unit of measure used in the previous column

"1st QTR Quantity" - Provide a hard number indicating progress towards the "Year's QTY Target"

"Year's Success Target" - Number for a way of measuring *quality* of service provided --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"Success Unit of Measure" - Explanation of the number in the previous column --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"1st QTR Success" - Provide a hard number indicating progress towards the "Year's Success Target"

3/14/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Fill in All Blank Columns or Those with Question Marks. Use the Attached Blank Form to Enter New Ojectives.)

As you are aware, one of the key pieces of information you are to provide with this 2nd QTR progress report is whether or not you intend to renew this site for the next program year begining approximatley Sept/Oct 1996. If you intend to renew this site for the next program year, indicate whether the objectives listed below will remain the same for the next year's program. If they will remain the same write OK next to them, if one will be not be an objective to be performed at this site for next year, write the word DELETE next to it. If you are proposing one or more new objectives for this site identify them using the format attached to question 14. You may write them on this sheet (be sure to include quantity and quality measures) or you may use a separate piece of paper BUT be certain you clearly identify the operating site to which they belong.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	2 nd QTR Quantity	Year's Success Target	Success Unit of Measure	2 nd QTR Success
SC	T45A	3	EN-R016	Farmers trained & educated in agricultural diversification OK	1000	farmers	295	90	% of farms implementing production	90
SC	T45A	3	EN-E106	Sustainable agriculture education OK	1000	farmers	295	80	% of adults demonstrating increased knowledge	90

We intend to renew this site for the next program year.

The objectives will be the same.

14. PROGRESS TOWARDS ACCOMPLISHING ADDITIONAL COMMUNITY SERVICE OBJECTIVES

Use this section to report progress towards completing additional new objectives --- those objectives in addition to the main objectives of each project listed on the proceeding page. Please fill in all columns for all objectives. It is important to make sure that each objective is listed with its own "OP site" (Operating site) code; this ensures that we know precisely what service is performed at each site. Please fill in all columns for each objective. Under "Obj No.," please give each new objective a number different from the number used for any of the objectives on the proceeding page. Under "PGM Code", please use a one-letter and three-digit code to describe the service from the code list provided at the end of this report. Under "Obj/Impact statement," provide a several-word summary of the nature of the service project -- this verbal summary should roughly match the "PGM Code" listed in the previous column. Under "Year's QTY Target," provide a hard number for the people or things aided. Under "Target Unit of Measurement," specify what unit of measure was used in the previous column -- such as miles, number of people served, acres, etc. Under "1st QTR Quantity," provide a hard number indicating progress towards the "Year's QTY Target" that was accomplished during this reporting period. Under "Year's Success Target," provide a hard number for a way of measuring how well the service was provided. Under "Successes Unit of Measure," specify exactly what the number in the previous column meant. Under "I st QTR Success," provide a hard number indicating progress towards the "Year's Success Target" that was accomplished during this reporting period.

State Op Site	Obj No.	PGM Code	Obj/Impact statement	Year's QTY Target	QTY Unit of Measure	1st QTR Quantity	Year's Success Target	Success Unit of Measure	1st QTR Success
{SAMPLE:}									
CA Y05A	18	EN96	Constrcuting whale nesting boxes	3	Boxes	1	90	% meeting stand.	95%

15. **Community Service Objectives Narrative (optional)**: If you feel it is necessary and/or helpful, you may use this space to describe in more detail accomplishments towards the original community service objectives reported in question 13 and/or your additional community service objectives reported in question 14. Please make sure you include the Operating Site ID Number in each narrative description so we can be clear which accomplishment is matched to which site.

16. **Community Building Objectives Narrative (optional):** Briefly describe how projects have brought together diverse groups of people, empowered communities to solve their own problems, built-long term structures that will last beyond each AmeriCorps Member's term of service, and generally improved the abilities of local citizens to help improve their own lives.

17. **AmeriCorps Member Development Objectives Narrative (optional):** Briefly describe how the AmeriCorps Members themselves have benefited from serving in the program, particularly in regard to expanding their own educational opportunity and increasing their own ethic of personal responsibility. Describe specific skills learned by Members through either their service or training. Describe any Members that earned a GED or otherwise advanced their education. Describe any Members that left public assistance to join AmeriCorps. Relate how AmeriCorps allowed Members to continue college or graduate school. Describe how Members may have changed their ethic of work, citizenship, or community volunteerism.

SECTION V - SUCCESS STORIES:

18. **Unique Successes or Great Stories :** Briefly describe one or two unique and/or exceptional success stories, a program highlight, or a 'great story' from your state. Please explain any instance in which AmeriCorps Members recruited non-AmeriCorps community volunteers for projects. Please include all media coverage, including original newspaper clips, videotapes of TV coverage, and cassette tapes of radio coverage; any letters of support or thank you letters; "before and after" photographs, brochures, posters, and newsletters created by the project; and other types of creative documentation.

See attached newspaper clips covering one of several meetings the AmeriCorps rural development team has conducted to educate farmers about Sustainable agriculture using Alternative Diversified Crops and Livestock.

SECTION VI - CHALLENGES

19. **Difficulties Faced by the Program:** Use this section to report on any problems your Members have encountered in the program this period. These should be significant issues which were related to achieving objectives, significant delays in implementation, administrative problems, or any other expectations, events or incidents that have caused the Members concern. State the problem concisely and how the issue has, or has not been resolved. Be sure to outline the steps taken and identify any resources needed to assist in resolving the problem.

None

SECTION V - GENERAL INFORMATION

20. **National Identity Activities (OPTIONAL):** Please describe any activities undertaken by Members that fostered the national identity of AmeriCorps. These could include joint service activities, meetings with other AmeriCorps projects, national telephone conference calls, use of Internet to communicate with other sites, etc.

The FSA/AmeriCorps Team on March 30, 1996, participated with other AmeriCorps members in state wide training conducted by the South Carolina Commission on National and Community Service. This training covered CPR, Leadership Skills, How to deal with difficult people, and conflict management.

21. **Organizational Changes:** Please outline and describe any changes in your program's organization and/or structure during the quarter.

One AmeriCorps team member (John Carter) resigned on March 15, 1996, to accept full time employment with a private industry. We will not fill this position. We will relinquish this position and reapportion the workload among the remaining team members.

22. **Organizational Improvements (OPTIONAL):** Please write any suggestions by you, your Members, site managers, or anyone else regarding ways in which the USDA or CNS AmeriCorps program could be improved.

23. **Primary Training and Technical Assistance Needs (OPTIONAL):** Please specify precisely what kind of staff or Member training or other technical assistance can be provided by USDA, the Corporation for National Service, or other sources to improve your projects.

{END OF REPORT}

UNITED STATES DEPARTMENT OF AGRICULTURE

AmeriCorps *USA

USDA State Progress Report (CNS Grant No. 95ADFDC047)

1. **Check this reporting period:** xx First (10/1 - 12/31) o Second (1/1 - 3/31) o Third (4/1 - 6/30) o Fourth (7/1 - 9/30)

SECTION I - STATE INFORMATION

2. **State:** South Carolina

3. **Agency:** ARS o NRCS o Forest Service o RECD o FSA xx FCS o

SECTION II - STATE CONTACT INFORMATION:
(Make Corrections if Necessary)

4. **Contact Name:** Robert (First) Jackson (Middle) Eaddy (Last)

5. **Title:** State Project Director

6. **Address:** Robert Eaddy
FSA
1927 Thurmond Mall, Suite 100
Columbia SC 29201

City **State** **Zip**

Telephone number: 803-765-5429

8. **Fax number:** 803-765-5156

9. **E-Mail Address (if any) :**

1/31/96

10. MEMBER DATA:

OP SITE ID: T45A Site Supervisor: John Rogers PHONE: 803-~~665-8284~~ 669-9686

Agency/Org Name: Florence County FSA Office FAX: 803~~6699685~~ 665-8284

STATE: SC City: Florence , SC

No. of Members Allocated by USDA: 5

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
CARTER , JOHN M.	(b)(6)	F	A	A	544				
GREEN , AUDREY T.		F	A	A	560				
HALL , ANNIE .		F	A	A	560				
TANNER, JR , HAROLD F.		F	A	A	400				
WHITE , CARRIE L.		F	A	A	480				
~~WJOTE , CARRIE L.~~		~~F~~	~~A~~	~~A~~	*				

*There is no such person as Carrie L. Wjob. The social security number by this name is the same as that listed for Carrie L. White on the line above. Please remove the last name entry on this sheet.

** Please note correction on Phone & FAX

1/31/96

10. MEMBER DATA:

OP SITE ID: T45A

STATE: SC

Site Supervisor: John Rogers

Agency/Org Name: Florence County FSA Office

City: Florence , SC

PHONE: 803-~~665-8284~~ 669-9686

FAX: 803~~6699686~~ 665-8284

No. of Members Allocated by USDA: 5

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total

No. of Members Allocated by USDA: 5

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations): ~~6~~ 5

No. of Members for Whom Forms Have NOT Been Recieved*: ~~-1~~ 0

ENTER the number of vacancies that you intend to fill in the next reporting period: 0

ENTER the number of vacancies you intend to relinquish for the program year: 0

If the number of Members allocated is greater than the number of forms received, there are four options: 1. There are Members enrolled in programs whose forms have not been submitted to the USDA Director of National Service. If that is the case, list the names, SSN, Status and hours of the missing members on the back of this sheet and send the enrollment forms to the USDA Director of National Service. 2. The enrollment forms were sent directly to the Corporation. If that is the case, send copies to the USDA Director of National Service immediately. 3. There are vacancies in your program you intend to fill in the next reporting period. If that is the case, enter the number of vacancies on the appropriate line. 4. There are vacancies that you can not fill and you are relinquishing them.

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If the number of members for whom forms have been received is greater than the number of members allocated resulting in a negative number appearing in the "No. of Members for Whom Forms Have NOT Been Received" line, you have enrolled more members in your program than authorized. Please explain this over enrollment. It may be that some members have terminated, in which case, change their status on this form and submit the proper end of term of service form to the USDA Director of National Service.

*Only 5 members have been enrolled in the program. No member has been terminated, and no End of Service Form needs to be filled out. Please note explanation on prior page under item 10.

1/31/96

10. MEMBER DATA:

OP SITE ID: T45A Site Supervisor: John Rogers PHONE: 803-66[illegible]66

STATE: SC Agency/Org Name: Florence County FSA Office FAX: 803669[illegible]66

City: Florence , SC

No. of Members Allocated by USDA: 5

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Tota

No. of Members Allocated by USD

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations

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*Only 5 members have been enrolled in the program. No member has been terminated, and no End of Service Form needs to be filled out. Please note explanation on prior page under item 10.

11. Please list the total number of **volunteers** o took part in activities which were ponsored or organized by all the Members in the state during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
12				

12. **Please list the total number of hours of community service** completed by the volunteers cited above during this period. (In question 18, briefly explain what these volunteers accomplished)

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
80				

SECTION IV - PROGRESS TOWARDS ACCOMPLISHING SERVICE OBJECTIVES:

13. **Original Community Service Objectives:** Attached are sheets summarizing the community service objectives that were originally approved for each operating site. In cases where a single objective may take an entire year to complete, that objective may have a sub-objective listed. **You need to fill in the column marked "1st QTR Quantity" and the column marked "1st QTR Success" — as well as any column that is blank, has a zero, or has a question mark — for EVERY operating site.** Each chart should have the following columns:

"State" - The standard two-letter code for your state

"Obj No" - Each community service objective for each site is assigned an individual number

"Op Site" - Each site's unique operating site identification

"PGM Code" - Each type of service has been assigned a unique code to describe that type of service. See the appendix to this report entitled "Community Service PGM Code List"

"Obj/Impact Statement" - A few words verbally summarizing the community service objective

"Year's QTY Target" - The year's numerical goal for the people or things to be aided

"Target Unit of Measurement" - The unit of measure used in the previous column

"1st QTR Quantity" - Provide a hard number indicating progress towards the "Year's QTY Target"

"Year's Success Target" - Number for a way of measuring *quality* of service provided — if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"Success Unit of Measure" - Explanation of the number in the previous column — if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"1st QTR Success" - Provide a hard number indicating progress towards the "Year's Success Target"

2/06/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Flit in All Blank Columns or Those with Question Marks. Use the Attached Blank Form to Enter New Objectives.)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	1 st QTR Quantity	Year's Success Target	Success Unit of Measure	1 st QTR Success
SC	T45A	3	E106 ~~E017~~	Sustainable agriculture education	~~2500~~	farmers			% of adults demonstrating increased knowledge	
			R016	Farmers trained & educated in agricultural diversification	1000		116	90		95

14. PROGRESS TOWARDS ACCOMPLISHING ADDITIONAL COMMUNITY SERVICE OBJECTIVES

Use this section to report progress towards completing additional new objectives --- those objectives in addition to the main objectives of each project listed on the proceeding page. Please fill in all columns for all objectives. It is important to make sure that each objective is listed with its own "OP site" (Operating site) code; this ensures that we know precisely what service is performed at each site. Please fill in all columns for each objective. Under "Obj No.," please give each new objective a number different from the number used for any of the objectives on the proceeding page. Under "PGM Code", please use a one-letter and three-digit code to describe the service from the code list provided at the end of this report. Under "Obj/Impact statement," provide a several-word summary of the nature of the service project -- this verbal summary should roughly match the "PGM Code" listed in the previous column. Under "Year's QTY Target," provide a hard number for the people or things aided. Under "Target Unit of Measurement," specify what unit of measure was used in the previous column -- such as miles, number of people served, acres, etc. Under "1st QTR Quantity," provide a hard number indicating progress towards the "Year's QTY Target" that was accomplished during this reporting period. Under "Year's Success Target," provide a hard number for a way of measuring how well the service was provided. Under "Successes Unit of Measure," specify exactly what the number in the previous column meant. Under "1 st QTR Success," provide a hard number indicating progress towards the "Year's Success Target" that was accomplished during this reporting period.

State Op Site	Obj No.	PGM Code	Obj/Impact statement	Year's QTY Target	QTY Unit of Measure	1st QTR Quantity	Year's Success Target	Success Unit of Measure	1st QTR Success
{SAMPLE:}									
CA Y05A	18	EN96	Constructing whale nesting boxes	3	Boxes	1	90	% meeting stand.	95%
SC T45A	NONE AT THIS TIME								

15. **Community Service Objectives Narrative** (optional): If you feel it is necessary and/or helpful, you may use this space to describe in detail accomplishments towards the original community service objectives reported in questions 13 and/or you additional community service objectives reported in question 14. Please make sure you include the Operating Site ID Number in each narrative description so we can be clear which accomplishment is matched to which site.

Operating Site ID Number 95ADFDC047T45A
When you under take a project to develop a portfolio with 14 or more diversified alternative crops and agriculture that are environmentally sound, substainable and are suited to the soil, climate and market within a geographical region, this becomes a giant task. If you also add to the above 5 diverse individuals with limited knowledge about farming and research and coach them into becoming a research team, you further complicate the mission. There is no central place in the U.S. where this type of information can be collected. The Cooperative Extension Service in this state and numerous other states have been very helpful, but they don't have complete and updated information on these crops or livestock. The team members have contacted numerous Land Grant Universities across the U.S. to find specific information on these crops and livestock. They have contacted producers in the private sector who are engaged in the production of these commodities and/or animals. They have contacted Producer Associations, food and fiber processors who handle these commodities and sell the finished product. Some of these products are so new in the U.S. that production markets for their sales will be several years from now. Many specialist dealing with these commodities had differing opinions about the best way to engage in the production of these crops and livestock. This in turn required careful comparison, consideration and decision analysis on the part of this AmeriCorps Team.
Overall, I am very pleased with the research effort done by this Rural Development Team. They have produced a portfolio of 14 different diverse crops, and livestock to present to farmers in a region that has not been very diversified. Their presentations are interesting and through enough to give a farmer both the pros and cons if he elects to engage in the production of one of these alternative diversified crops or livestock. This is a job that no other agency in our state can do because they do not have the funds, time, manpower or knowledge to commit to such a mission.

16. **Community Building Objectives Narrative** (optional): Briefly describe how projects have brought together diverse groups of people, empowered communities to solve their problems, built-long term structures that will last beyond each AmeriCorps Member's term of service, and generally improved the abilities of local citizens to help improve their own lives.

None

17. **AmeriCorps Member Development Objectives Narrative** (optional): Briefly describe how the AmeriCorps Members themselves have benefited from serving in the program, particularly in regard to expanding their own educational opportunity and increasing their

own ethic of personal responsibility. Describe specific skills learned by Members through either service or training. Describe any Members that earned a GED or otherwise advanced their education. Describe any Members that left public assistance to join AmeriCorps. Relate how AmeriCorps allowed Members to continue college or graduate school. Describe how Members may have changed their ethic of work, citizenship, or community volunteerism.

None

18. **Unique Success or Great Stories**: Briefly describe one or two unique and/or exceptional success stories, a program highlight, or a 'great story' from your state. Please explain any instance in which AmeriCorps Members recruited non-AmeriCorps community volunteers for projects. Please include all media coverage, including original newspaper clips, video tapes of TV coverage, and cassette tapes of radio coverage; any letters of support or thank you letters; "before and after" photographs, brochures, posters, and newsletters created by the project, and other types of creative documentation.

We wrote a press release for the AMERICORPS/USDA ONLINE newsletter about our team and their research work now be compiled prior to conducting educational meetings with farmers in eastern South Carolina. (See November 30, 1995 issue of AMERICORPS/USDA ONLINE).

AmeriCorps Team members have recruited various staff personnel from many agencies, Universities, and institutions to obtain information and material needed for the sustainable diversified agriculture education program. Many hours have been spent in personal visits, telephone conversations, and written correspondence. Some of the agencies and instutional personnel contacted were:

Clemson University and Clemson Cooperative Extension Service
Texas A & M University
Langston University
N. C. State University
Vigrinia State University
Alabama Cooperative Extension Service
Carolina Exotic Mushroom Association
American Nurseryman Association
American Ostrich Association
S. C. Horesman's Council
S.C. Commission of Forestry
S.C. Natural Resources Commission
S.C. Department of Agriculture
Va. Department of Agriculture
Internet search on commodities

19. **Difficulties Faced by the Program**: Use this section to report on any problems your Members have encountered in the program this period. These should be significant issues

which were related to achieving objectives, significant delays in implementation, administrative problems, or any other expectations, events or incidents that have caused the Members concern. State the problem concisely and how the issue has, or has not been resolved. Be sure to outline the steps taken and identify any resources needed to assist in resolving the problem.

Problem:

When you take a diverse group of people (different races, sex, age, educations, egos, personalities and backgrounds) and try to develop them into a highly efficient research team which cooperates in all areas of endeavor to accomplish the objectives and missions established in a short period of time and they have no experience in this area you have a problem.

HAS THE PROBLEM BEEN RESOLVED?

Yes

WHAT DO YOU SEE AS THE SOLUTION OR RESOURCES NEEDED TO RESOLVE THIS PROBLEM?

The problem was resolved through the use of Cluster Meetings held once a week to discuss their problems, likes and dislikes. This served as a forum to bring into the open any problem that one member was having with another or his or her job. This also allowed the members to communicated more openly with each other. This allowed them to stay informed on what each other is working on and how they were progressing. It also allowed them to see how each members's work would contribute to the total mission in accomplishing the objective established for the team. The site supervisor and program director also attended the cluster meetings to learn about member's problems. Them director and site supervisor then prepared a standard operating procedure (SOP) for the team to follow which eliminated many of the problems. They also counseled individual members as necessary to resolve other problems.

20. **National Identity Activities (OPTIONAL):** Please describe any activates undertaken by Members that fostered the national identity of AmeriCorps. These could include joint service activities, meetings with other AmeriCorps projects, national telephone conference calls, use of Internet to communicate with other sites, etc.

    None

21. **Organizational Changes:** Please outline and describe any changes in your program's organization and/or structure during the quarter.

    None

22. **Organizational Improvements (OPTIONAL):** Please write any suggestions by you, your Members, site managers, or anyone else regarding ways in which the USDA or CNS AmeriCorps program could be improved.

    None

23. **Primary Training and Technical Assistance Needs (OPTIONAL):** Please specify precisely what kind of staff or Member training or other technical assistance can be provided by USDA, the Corporation for National Service, or other source to improve your projects.

    None

{END OF REPORT}

UNITED STATES DEPARTMENT OF AGRICULTURE

August 27, 1996

TO: Walley Turner, AmeriCorps Project Director, NRCS, South Carolina

FROM: Joel Berg, USDA Director of National Service

SUBJECT: Year-to-Date Data on Objectives and Member Forms

Attached is a "year-to-date" progress report showing accomplishments on objectives through the third quarter report. **This data, plus the fourth quarter data, will be provided to members of Congress representing your state and to your agency leaders. It is imperative that the information reflected in this report be as accurate as possible**. The report also shows the degree to which you have accomplished your objectives which were agreed to at the beginning of this program year.

I ask that you carefully review this report. Review each objective with the following items in mind:

1. **Accuracy of the data**. This information will be shared with many different groups, and it is important to be accurate in our reporting as well as getting credit for all the great work you have done during the year.

2. **Completion of community service objectives**. One way to determine the successful completion of objectives is to measure accomplishments against the target quantity measurement which you established at the beginning of the year. The table below gives you a snapshot picture of your accomplishments through the third quarter. The last five columns reflects your work measured against the target quantity.

SITE #	NUMBER OF OBJECTIVES	NUMBER OF OBJECTIVES EXCEEDED	NUMBER OF OBJECTIVES AT 100%	NUMBER OF OBJECTIVES 50-100% COMPLETE	NUMBER OF OBJECTIVES 0-50% COMPLETE	NO TARGET QUANTITY
Y45A	12	3	1	1	6	1
Y45B	9	1		2	3	3
Y45C	9			3	3	3
Y45D	9	1		1	4	3
Y45E	9				6	3

3. **Program codes**. Review the program code for each of your objectives. Please be sure that the data you are recording for quantity matches the quantity for that program code. If you are counting something other than the quantity measurement for the code, please indicate exactly what you are counting.

4. **Double counting**. Please do NOT double count your accomplishments.

5. **Congressional Districts.** Please indicate in which Congressional District(s) the work was actually accomplished. This will let us be very specific to Members of Congress as to what work was done in their district.

6. **Volunteers.** Please explain what the volunteers have done with your AmeriCorps members. Also ensure that the volunteer numbers you have been providing to us each quarter is for the quarter **only**, not cumulative for the year.

Your assistance in this reporting enables us to meet our legal obligations as well as providing us with the necessary information to promote our USDA AmeriCorps program to all interested parties. Providing this data in an accurate and timely manner is one of your most important duties as an AmeriCorps Project Director.

Member Forms

Below is a list of members who still have outstanding forms according to information previously provided to us by you. **These forms must be submitted along with this forth quarter report.** You have a legal obligation as a project director to ensure that all member forms are submitted to this office prior to the close of the program year.

NAME	TYPE OF FORM
Suzan Cannif	End of Term of Service Form
Angela Morgan	End of Term of Service Form
John Morgan	End of Term of Service Form

Also include any End of Term forms for members who have now completed their term of service.

If you have any questions or problems, please contact Dee DiFiore at (202) 690-3051 or Ron DeMunbrun at (202) 690-3894.

Thank you for your cooperation on this matter.

Attachment

cc:
Larry Holmes, AmeriCorps Program Manager, NRCS

USDA AMERICORPS - 95ADFDC047XXXX

8/27/96
2:11 pm

FIRST THREE QUARTERS' PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES
BY STATE AND PROGRAM (OBJECTIVE) CODE

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	FIRST 3 QTR's Quantity	PERCENT COMPLETE
SC	Y45A	12	EN-E012A	Environmental conservation education	13000	students - educated	15000	115.38 %
SC	Y45A	3	EN-E015A	Develop outdoor learning center	20	classrooms - outdoor	8	40.00 %
SC	Y45A	8	EN-E015A	Construct outdoor learning centers	25	classrooms - outdoor	57	260.00 %
SC	Y45A	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	250	25.00 %
SC	Y45A	5	EN-E044A	Construct additional public access sites	5	structures - built	1	20.00 %
SC	Y45A	9	EN-E049B	Construct recreation sites	10	sites - constructed	9	90.00 %
SC	Y45A	11	EN-E089	Urban community facilities	2	acres - aided	2	100.00 %
SC	Y45A	1	EN-E092A	Conduct water quality assessments	8	assessments - water quality	2	25.00 %
SC	Y45A	10	EN-E109A	Land use planning	2	plans	3	150.00 %
SC	Y45A	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	2	800.00 %
SC	Y45A	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	30	7.50 %
SC	Y45A	6	EN-R013A	Implement 911 emergency response system	10	counties - 911 system	4	40.00 %

USDA AMERICORPS - 95ADFDC047XXXX

8/27/96
2:11 pm

FIRST THREE QUARTERS' PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES
BY STATE AND PROGRAM (OBJECTIVE) CODE

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	FIRST 3 QTR's Quantity	PERCENT COMPLETE
SC	Y45B	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	5	62.50 %
SC	Y45B	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	5	125.00 %
SC	Y45B	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	0	0.00 %
SC	Y45B	5	EN-E044A	Construct additional public access sites	5	structures - built	6	120.00 %
SC	Y45B	9	EN-E049B	Construct recreation sites	8	sites - constructed	2	25.00 %
SC	Y45B	1	EN-E092A	Conduct water quality assessments		assessments - water quality	2	0.00 %
SC	Y45B	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	0	100.00 %
SC	Y45B	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	40	10.00 %
SC	Y45B	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	2	0.00 %

USDA AMERICORPS - 95ADFDC047XXXX

8/27/96
2:11 pm

FIRST THREE QUARTERS' PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES
BY STATE AND PROGRAM (OBJECTIVE) CODE

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	FIRST 3 QTR's Quantity	PERCENT COMPLETE
SC	Y45C	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	4	50.00 %
SC	Y45C	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	5	112.50 %
SC	Y45C	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	600	60.00 %
SC	Y45C	5	EN-E044A	Construct additional public access sites	5	structures - built	0	0.00 %
SC	Y45C	9	EN-E049B	Construct recreation sites	8	sites - constructed	3	37.50 %
SC	Y45C	1	EN-E092A	Conduct water quality assessments		assessments - water quality	1	0.00 %
SC	Y45C	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	0	0.00 %
SC	Y45C	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	0	0.00 %
SC	Y45C	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	4	0.00 %

USDA AMERICORPS - 95ADFDC047XXXX

8/27/96
2:11 pm

FIRST THREE QUARTERS' PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES
BY STATE AND PROGRAM (OBJECTIVE) CODE

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	FIRST 3 QTR's Quantity	PERCENT COMPLETE
SC	Y45D	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	3	37.50 %
SC	Y45D	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	12	187.50 %
SC	Y45D	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	0	0.00 %
SC	Y45D	5	EN-E044A	Construct additional public access sites	5	structures - built	2	40.00 %
SC	Y45D	9	EN-E049B	Construct recreation sites	8	sites - constructed	2	25.00 %
SC	Y45D	1	EN-E092A	Conduct water quality assessments		assessments - water quality	1	0.00 %
SC	Y45D	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	1	400.00 %
SC	Y45D	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	200	50.00 %
SC	Y45D	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	6	0.00 %

USDA AMERICORPS - 95ADFDC047XXXX

8/27/96
2:11 pm

FIRST THREE QUARTERS' PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES
BY STATE AND PROGRAM (OBJECTIVE) CODE

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	FIRST 3 QTR's Quantity	PERCENT COMPLETE
SC	Y45E	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	2	25.00 %
SC	Y45E	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	2	50.00 %
SC	Y45E	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	0	0.00 %
SC	Y45E	5	EN-E044A	Construct additional public access sites	5	structures - built	1	20.00 %
SC	Y45E	9	EN-E049B	Construct recreation sites	8	sites - constructed	2	25.00 %
SC	Y45E	1	EN-E092A	Conduct water quality assessments		assessments - water quality	3	0.00 %
SC	Y45E	7	EN-E166B	Repair riparian areas	0	miles - riparian repairs	0	0.00 %
SC	Y45E	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	100	25.00 %
SC	Y45E	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	0	0.00 %

UNITED STATES DEPARTMENT OF AGRICULTURE

AmeriCorps *USA

USDA State Progress Report
(CNS Grant No. 95ADFDC047)

1. **Check this reporting period:** ❑ First (10/1 - 12/31) ❑ Second (1/1 - 3/31) ❑ Third (4/1 - 6/30) ☒ Fourth (7/1 - 9/30)

SECTION I - STATE INFORMATION

2. **State:** SC

3. **Agency:** ARS ❑ NRCS ☒ Forest Service ❑ RECD ❑ FSA ❑ FCS ❑

SECTION II - STATE CONTACT INFORMATION:
(Make Corrections if Necessary)

4. **Contact Name:** Wally Turner
1835 Assembly St., Rm 950
Columbia, SC 29201
_____ Last

5. Title: _____

6. **Address:** _____
street, number, and PO (if applicable)

_____ _____ _____
City **State** **Zip**

7. **Telephone number:** 803-253-3314

8. **Fax number:** 803-253-3670

9. **E-Mail Address (if any) :** _____

8/15/96

10. MEMBER DATA:

OP SITE ID: Y45A Site Supervisor: Keith Cain PHONE: 803-635-2757
Agency/Org Name: Crossroads of History RC&D FAX: 8036352081
STATE: SC City: Winnsboro , SC

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
FUNCHESS	, LOLITA	M.	(b)(6)	F	A	I	520	520	520	252	1560
GUNDLER	, KIMBERLY	M.		F	A	I	520	520	520	252	1560
KINARD	, KAREN	E.		F	A	I	520	520	520	252	1560
SHEA	, ERIC	A.		F	A	I	520	520	520	252	1560

Total Hours: 6240

No. of Members Allocated by USDA: 4

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations): 4

No. of Members for Whom Forms Have NOT Been Recieved*: 0

REMEMBER THAT THE TOTAL NUMBER OF HOURS FOR EACH MEMBER SHOULD BE THE HOURS SERVED AND NOT INCLUDE THE HOURS FOR PERSONAL LEAVE (40) AND HOLIDAYS (72). IF YOU HAVE BEEN COUNTING THESE IN THE FIRST 3 QUARTERS, PLEASE ADJUST THE 4TH QUARTERS HOURS SO THAT THE TOTAL IS AT LEAST 1700 OF SERVICE (assuming the person was full-time and successfully completed the program.) You can have more than 1700 hrs for a total just be sure all the hours were service hours. Thank You

* If the number of Members allocated is greater than the number of forms received, there are four options: 1. There are Members enrolled in programs whose forms have not been submitted to the USDA Director of National Service. If that is the case, list the names, SSN, Status and hours of the missing members on the back of this sheet and send the enrollment forms to the USDA Director of National Service. 2. The enrollment forms were sent directly to the Corporation. If that is the case, send copies to the USDA Director of National Service immediately. 3. There are vacancies in your program you intend to fill in the next reporting period. If that is the case, enter the number of vacancies on the appropriate line. 4. There are vacancies that you can not fill and you are relinquishing them.

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

If the number of members for whom forms have been received is greater than the number of members allocated resulting in a negative number appearing in the "No. of

8/15/96

10. MEMBER DATA:

OP SITE ID: Y45B

STATE: SC

Site Supervisor: Steve Edwards
Agency/Org Name: Lowcountry RC&D
City: Walterboro , SC

PHONE: 803-549-5596
FAX: 8035492597

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
DUFFY	, KIMBERLY	A.	(b)(6)	F	A	I			520	342	520
GREENE	, ERIK	N.		F	A	I	520	520	520	252	1560
MAULDIN	, MERIDITH	G.		F	A	I	520	520	520	252	1560
MCLEAN	, DOUGLAS	J.		F	A	I	520	520	520	252	1560
STEVENS	, SHERELL	.		F	E	II	520	320	0	–	840

8/15/96

10. MEMBER DATA:

OP SITE ID: Y45C
STATE: SC

Site Supervisor: Jimmy Sanders
Agency/Org Name: Ninety Six RC&D
City: Greenwood , SC

PHONE: 803-229-2174
FAX: 8032292845

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
HOLCOMBE	, DAVID	E.	(b)(6)	F	A	I	520	520	520	252	1560
JOHNSON	, DANNY	E.		F	A	I	520	520	520	252	1560
PAULUS	, ANGILEEN	M.		F	A	I	520	520	520	252	1560
WILSON	, GEORGE	D.		F	A	I	520	520	520	252	1560

Total Hours: 6240

No. of Members Allocated by USDA: 4

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations): 4

No. of Members for Whom Forms Have NOT Been Recieved*: 0

REMEMBER THAT THE TOTAL NUMBER OF HOURS FOR EACH MEMBER SHOULD BE THE HOURS SERVED AND NOT INCLUDE THE HOURS FOR PERSONAL LEAVE (40) AND HOLIDAYS (72). IF YOU HAVE BEEN COUNTING THESE IN THE FIRST 3 QUARTERS, PLEASE ADJUST THE 4TH QUARTERS HOURS SO THAT THE TOTAL IS AT LEAST 1700 OF SERVICE (assuming the person was full-time and successfully completed the program.) You can have more than 1700 hrs for a total just be sure all the hours were service hours. Thank You

* If the number of Members allocated is greater than the number of forms received, there are four options: 1. There are Members enrolled in programs whose forms have not been submitted to the USDA Director of National Service. If that is the case, list the names, SSN, Status and hours of the missing members on the back of this sheet and send the enrollment forms to the USDA Director of National Service. 2. The enrollment forms were sent directly to the Corporation. If that is the case, send copies to the USDA Director of National Service immediately. 3. There are vacancies in your program you intend to fill in the next reporting period. If that is the case, enter the number of vacancies on the appropriate line. 4. There are vacancies that you can not fill and you are relinquishing them.

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

If the number of members for whom forms have been received is greater than the number of members allocated resulting in a negative number appearing in the "No. of

8/15/96

10. MEMBER DATA:

OP SITE ID: Y45D
STATE: SC

Site Supervisor: Wylie Owens
Agency/Org Name: Pee Dee RC&D
City: Darlington , SC

PHONE: 803-393-9809
FAX: 8033956827

No. of Members Allocated by USDA: 4

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
BETHEA , JOAN .	(b)(6)	F	A	I	520	520	520	252	1560
BEVER , CHRISTOPHER R.		F	A	I	520	520	520	252	1560
CANNIF , SUZAN E.		F	E	I	0	320			320
KENNEDY , WILBERT .		F	A	I	520	520	520	252	1560
MORGAN , ANGELA C.		F	E	I	280	0	0		280

8/15/96

10. MEMBER DATA:

OP SITE ID: Y45E

Site Supervisor: Roy Todd

PHONE: 803-629-8784

Agency/Org Name: Santee-Wateree RC&D

FAX: 8036654136

STATE: SC

City: Florence , SC

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
BOSTIC	, VINCENT	R.	(b)(6)	F	A	I	520	520	520	252	1560
MCFADDEN	, DEBORAH	R.		F	E	II	272	0	0	____	272
MORGAN, III	, JOHN	E.		F	A	I	520	520	520	252	1560
WESTON	, ETHAN	N.		F	A	I	520	520	520	252	1560

Total Hours: 4952

No. of Members Allocated by USDA: 4

No. of Active Members Whose Enrollment Forms were recieved at USDA (not including terminations): 4

No. of Members for Whom Forms Have NOT Been Recieved*: 0

REMEMBER THAT THE TOTAL NUMBER OF HOURS FOR EACH MEMBER SHOULD BE THE HOURS SERVED AND NOT INCLUDE THE HOURS FOR PERSONAL LEAVE (40) AND HOLIDAYS (72). IF YOU HAVE BEEN COUNTING THESE IN THE FIRST 3 QUARTERS, PLEASE ADJUST THE 4TH QUARTERS HOURS SO THAT THE TOTAL IS AT LEAST 1700 OF SERVICE (assuming the person was full-time and successfully completed the program.) You can have more than 1700 hrs for a total just be sure all the hours were service hours. Thank You

* If the number of Members allocated is greater than the number of forms received, there are four options: 1. There are Members enrolled in programs whose forms have not been submitted to the USDA Director of National Service. If that is the case, list the names, SSN, Status and hours of the missing members on the back of this sheet and send the enrollment forms to the USDA Director of National Service. 2. The enrollment forms were sent directly to the Corporation. If that is the case, send copies to the USDA Director of National Service immediately. 3. There are vacancies in your program you intend to fill in the next reporting period. If that is the case, enter the number of vacancies on the appropriate line. 4. There are vacancies that you can not fill and you are relinquishing them.

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

If the number of members for whom forms have been received is greater than the number of members allocated resulting in a negative number appearing in the "No. of

11. Please list the total number of **volunteers** who took part in activities which were sponsored or organized by all the Members in the state during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
			40	

12. Please list the total number of hours of community service completed by the volunteers cited above during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
			640	

SECTION IV - PROGRESS TOWARDS ACCOMPLISHING SERVICE OBJECTIVES:

13. Original Community Service Objectives: Attached are sheets summarizing the community service objectives that were originally approved for each operating site. In cases where a single objective may take an entire year to complete, that objective may have a sub-objectives listed. **You need to fill in the column marked "4th QTR Quantity" and the column marked "4th QTR Success" --- as well as any column that is blank, has a zero, or has a question mark --- for EVERY operating site.** Each chart should have the following columns:

"State" - The standard two-letter code for your state

"Obj No" - Each community service objective for each site is assigned an individual number

"Op Site" - Each site's unique operating site identification

"PGM Code" - Each type of service has been assigned a unique code to describe that type of service. See the appendix to this report entitled "Community Service PGM Code List"

"Obj/Impact Statement" - A few words verbally summarizing the community service objective

"Year's QTY Target" - The year's numerical goal for the people or things to be aided

"Target Unit of Measurement" - The unit of measure used in the previous column

"4th QTR Quantity" - Provide a hard number indicating progress towards the "Year's QTY Target"

"Year's Success Target" - Number for a way of measuring *quality* of service provided --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"Success Unit of Measure" - Explanation of the number in the previous column --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"4th QTR Success" - Provide a hard number indicating progress towards the "Year's Success Target"

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45A	1	EN-E092A	Conduct water quality assessments	4 ~~8~~	assessments - water quality	1	500	Number of people who adopt measures	200 ✓
SC	Y45A	10	EN-E109A	Land use planning	2	plans		100	% of plans implemented	
SC	Y45A	11	EN-E089	Urban community facilities	2	acres - aided			% of work meeting professional standards	
SC	Y45A	12	EN-E012A	Environmental conservation education	13000	students - educated		90	% of students with increased knowledge	
SC	Y45A	2	EN-E036B	Conduct grassland assessments	400 ~~1000~~	assessments - grassland	200	10000	# of acres actually protected	300 —
SC	Y45A	3	EN-E015A	Develop outdoor learning center	9 ~~20~~	classrooms - outdoor		10	% increase in outdoor learning center use	
SC	Y45A	4	EN-R010A	Installation of dry fire hydrants	100 ~~400~~	hydrants - installed		50	% reduction in fire or insurance rate	
SC	Y45A	5	EN-E044A	Construct additional public access sites	3 ~~5~~	structures - built	2	100	% of work meeting professional standards	100 ✓
SC	Y45A	6	EN-R013A	Implement 911 emergency response system	4 ~~10~~	counties - 911 system	4	10	# of roads inventories, signs posted, etc	4 ✓

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45A	7	EN-E166A	Repair riparian areas	2 ~~0~~	miles - riparian repairs		75	% decrease in erosion	
SC	Y45A	8	EN-E015A	Construct outdoor learning centers	10 ~~25~~	classrooms - outdoor	3	50	% of students showing increased knowledge	50%
SC	Y45A	9	EN-E049B	Construct recreation sites	8 ~~10~~	sites - constructed	1	100	% of sites meet professional standards	100%

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45B	1	EN-E092A	Conduct water quality assessments		assessments - water quality			Number of people who adopt measures	
SC	Y45B	2	EN-E036B	Conduct grassland assessments	200 ~~1000~~	assessments - grassland	250		# of acres actually protected	300 ✓
SC	Y45B	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	3	10	% increase in outdoor learning center use	10 ✓
SC	Y45B	4	EN-R010A	Installation of dry fire hydrants	50 ~~400~~	hydrants - installed	40		% reduction in fire or insurance rate	5% ✓
SC	Y45B	5	EN-E044A	Construct additional public access sites	5	structures - built			% of work meeting professional standards	
SC	Y45B	6	EN-R013A	Implement 911 emergency response system	2	counties - 911 system			# of roads inventories, signs posted, etc	✓
SC	Y45B	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs		40	% decrease in erosion	
SC	Y45B	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	3		% of students showing increased knowledge	50
SC	Y45B	9	EN-E049B	Construct recreation sites	4 ~~6~~	sites - constructed	2		% of sites meet professional standards	100%

Y45C

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45C	1	EN-E092A	Conduct water quality assessments	1	assessments - water quality	1		Number of people who adopt measures	100
SC	Y45C	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	450		# of acres actually protected	700
SC	Y45C	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	4	10	% increase in outdoor learning center use	50%
SC	Y45C	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed			% reduction in fire or insurance rate	
SC	Y45C	5	EN-E044A	Construct additional public access sites	2	structures - built	2		% of work meeting professional standards	100%
SC	Y45C	6	EN-R013A	Implement 911 emergency response system	4	counties - 911 system			# of roads inventories, signs posted, etc	
SC	Y45C	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs			% decrease in erosion	
SC	Y45C	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	4		% of students showing increased knowledge	50%
SC	Y45C	9	EN-E049B	Construct recreation sites	8	sites - constructed	5		% of sites meet professional standards	100%

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45D	1	EN-E092A	Conduct water quality assessments		assessments - water quality			Number of people who adopt measures	
SC	Y45D	2	EN-E036B	Conduct grassland assessments	250 ~~1000~~	assessments - grassland	250		# of acres actually protected	500 ✓
SC	Y45D	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	10	10	% increase in outdoor learning center use	
SC	Y45D	4	EN-R010A	Installation of dry fire hydrants	200 ~~400~~	hydrants - installed			% reduction in fire or insurance rate	
SC	Y45D	5	EN-E044A	Construct additional public access sites	5	structures - built	3		% of work meeting professional standards	100% ✓
SC	Y45D	6	EN-R013A	Implement 911 emergency response system	6 ✓	counties - 911 system			# of roads inventories, signs posted, etc	
SC	Y45D	7	EN-E166A	Repair riparian areas	1 ~~0~~	miles - riparian repairs			% decrease in erosion	
SC	Y45D	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	5		% of students showing increased knowledge	50% ✓
SC	Y45D	9	EN-E049B	Construct recreation sites	4 ~~6~~	sites - constructed	2		% of sites meet professional standards	100% ✓

8/15/96

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "4th QTR Quantity" enter the amount of work done in the fourth quarter. Do the same for "4th QTR Success".)

Remember, since this is the last or final report, there should be no objectives with a zero entered in quantity or success, if a zero was entered for the first Three quarters. (See your last quarterly report) If you have objectives that you could not do anything on please explain why.

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	4th QTR Quantity	Year's Success Target	Success Unit of Measure	4th QTR Success
SC	Y45E	1	EN-E092A	Conduct water quality assessments	3	assessments - water quality			Number of people who adopt measures	
SC	Y45E	2	EN-E036B	Conduct grassland assessments	250 ~~1000~~	assessments - grassland	260		# of acres actually protected	400
SC	Y45E	3	EN-E015A	Develop outdoor learning center	4 ~~8~~	classrooms - outdoor	3	10	% increase in outdoor learning center use	50%
SC	Y45E	4	EN-R010A	Installation of dry fire hydrants	~~100~~ 0 ~~400~~	hydrants - installed			% reduction in fire or insurance rate	
SC	Y45E	5	EN-E044A	Construct additional public access sites	2 ~~5~~	structures - built	3		% of work meeting professional standards	100
SC	Y45E	6	EN-R013A	Implement 911 emergency response system	4	counties - 911 system	4		# of roads inventories, signs posted, etc	6
SC	Y45E	7	EN-E166B	Repair riparian areas	0	miles - riparian repairs			% decrease in erosion	
SC	Y45E	8	EN-E015A	Construct outdoor learning centers	4 ~~8~~	classrooms - outdoor	2		% of students showing increased knowledge	50%
SC	Y45E	9	EN-E049B	Construct recreation sites	4 ~~8~~	sites - constructed	3		% of sites meet professional standards	100%

15. **Community Service Objectives Narrative (optional)**: If you feel it is necessary and/or helpful, you may use this space to describe in more detail accomplishments towards the original community service objectives reported in question 13 and/or your additional community service objectives reported in question 14. Please make sure you include the Operating Site ID Number in each narrative description so we can be clear which accomplishment is matched to which site.

16. **Community Building Objectives Narrative (optional):** Briefly describe how projects have brought together diverse groups of people, empowered communities to solve their own problems, built-long term structures that will last beyond each AmeriCorps Member's term of service, and generally improved the abilities of local citizens to help improve their own lives.

17. **AmeriCorps Member Development Objectives Narrative (optional):** Briefly describe how the AmeriCorps Members themselves have benefited from serving in the program, particularly in regard to expanding their own educational opportunity and increasing their own ethic of personal responsibility. Describe specific skills learned by Members through either their service or training. Describe any Members that earned a GED or otherwise advanced their education. Describe any Members that left public assistance to join AmeriCorps. Relate how AmeriCorps allowed Members to continue college or graduate school. Describe how Members may have changed their ethic of work, citizenship, or community volunteerism.

SECTION V - SUCCESS STORIES:

18. **Unique Successes or Great Stories :** Briefly describe one or two unique and/or exceptional success stories, a program highlight, or a 'great story' from your state. Please explain any instance in which AmeriCorps Members recruited non-AmeriCorps community volunteers for projects. Please include all media coverage, including original newspaper clips, videotapes of TV coverage, and cassette tapes of radio coverage; any letters of support or thank you letters; "before and after" photographs, brochures, posters, and newsletters created by the project; and other types of creative documentation.

On August 7, 1996, Approx. 75 people attended Americorps graduation including members, sponsors & families. Coverage by newspaper and TV.

SECTION VI - CHALLENGES

19. **Difficulties Faced by the Program:** Use this section to report on any problems your Members have encountered in the program this period. These should be significant issues which were related to achieving objectives, significant delays in implementation, administrative problems, or any other expectations, events or incidents that have caused the Members concern. State the problem concisely and how the issue has, or has not been resolved. Be sure to outline the steps taken and identify any resources needed to assist in resolving the problem.

None

SECTION V - GENERAL INFORMATION

20. **National Identity Activities (OPTIONAL):** Please describe any activities undertaken by Members that fostered the national identity of AmeriCorps. These could include joint service activities, meetings with other AmeriCorps projects, national telephone conference calls, use of Internet to communicate with other sites, etc.

6 Members Attended Training for Americorps Members conducted by State Commission for national service.

21. **Organizational Changes:** Please outline and describe any changes in your program's organization and/or structure during the quarter.

NONE

22. **Organizational Improvements (OPTIONAL):** Please write any suggestions by you, your Members, site managers, or anyone else regarding ways in which the USDA or CNS AmeriCorps program could be improved.

NONE

23. **Primary Training and Technical Assistance Needs (OPTIONAL):** Please specify precisely what kind of staff or Member training or other technical assistance can be provided by USDA, the Corporation for National Service, or other sources to improve your projects.

N/A

{END OF REPORT}

Dillon County

P.O. Drawer 449 • Dillon, South Carolina 29536 • (803) 774-1458

AUGUST 14, 1996

MARK BERKLAND
STATE CONSERVATIONIST
1835 ASSEMBLY ST ROOM 950
COLUMBIA, SOUTH CAROLINA 29201

DILLON COUNTY WAS VERY FORTUNATE TO HAVE THE DARLINGTON-BASED AMERICORPS TEAM CONSISTING OF CHRIS BEVER, JOAN BETHEA, WILBERT KENNEDY AND JOHN MORGAN WORKING CLOSELY WITH THE E9-1-1 OFFICE ON A STREET SIGN PROJECT JUNE 3 - JUNE 14, 1996.

THIS TEAM POSTED APPROXIMATELY THREE HUNDRED (300) STREET SIGNS AND AN ADDITIONAL TWO HUNDRED FIFTY (250) SIGN POSTS. THIS CONSISTED OF EVERYTHING FROM DIGGING THE HOLE TO ASSEMBLING AND PUTTING UP THE SIGN. ALSO THIS TEAM HAND DELIVERED FORTY (40) ADDRESSES AND MATCHED PHONE RECORDS FOR THESE.

THE USDA NATURAL RESOURCES CONSERVATION SERVICE SHOULD BE GENUINELY PROUD OF THIS TEAM FOR THEIR EFFORTS. THEIR WILLINGNESS TO DO ANYTHING ASKED OF THEM IS OVERWHELMING. **AMERICORPS SAVED DILLON COUNTY APPROXIMATELY 320 MAN HOURS AND $2500.**

THANK YOU AMERICORPS!

SINCERELY,

Patricia Miller

PATRICIA MILLER
DILLON COUNTY 9-1-1 COORDINATOR

pdm/cc:Chris Bever, Wylie Owens

DILLON COUNTY
quietly progressive

UNITED STATES DEPARTMENT OF AGRICULTURE

AmeriCorps *USA

USDA State Progress Report (CNS Grant No. 95ADFDC047)

1. **Check this reporting period:** o First (10/1 - 12/31) o Second (1/1 - 3/31) X Third (4/1 - 6/30) o Fourth (7/1 - 9/30)

SECTION I - STATE INFORMATION

2. **State:** South Carolina

3. **Agency:** ARS o NRCS X Forest Service o RECD o FSA o FCS o

SECTION II - STATE CONTACT INFORMATION:
(Make Corrections if Necessary)

4. **Contact Name:** Wally Turner
1835 Assembly St., Rm 950
Columbia, SC 29201
Last

5. Title: _____

6. **Address:** _____
street, number, and PO (if applicable)

_____ _____ _____
City **State** **Zip**

7. **Telephone number:** 803-253-3314

8. **Fax number:** 803-253-3670

9. **E-Mail Address (if any) :** _____

SECTION III - MEMBER DATA:

0. Attached are sheets concerning AmeriCorps Member data. The first type of Member Data sheet lists each Member, by operating site, for whom the USDA Office of National Service has received at least a Member enrollment form. The sheet will also list the number of slots allotted to that site and the number of enrollment forms received by the Department; you will need to fill in the number of Members actually enrolled. The sheets give the Member's name, social security number, and enrollment status. Please review the data and check for:

a. Correct spelling of the name;

b. Accuracy of the Social Security Number;

c. Service type (F= Full-time member; P= Part-time member);

d. Program Status (A = Active; C = Completed; E = Ended Service Early)*

e. Trust Status (A = Earning Award; B = Earned Award; C = Did Not Earn Award; D = On Hold by the Corporation for National Service; E = Under Review).

Alongside each name, give the total number of hours served (includes training time) by the Member this reporting period. Do this even if the Member has terminated during the reporting period. For Members who are on the list but have terminated or had their service type or status changed, just cross out the old status and print the new one alongside it. Make your corrections directly on this sheet and submit it along with the other portions of your progress report.

The second type of Member Data sheets give an Operating Site ID number and the name of the site supervisor but has no ember names listed. That is because the USDA Office of National Service has not received Enrollment forms for **any** Members from these sites. Please print the necessary information for each member on the appropriate sheet and submit an Enrollment form to the Department. If a Member began service but terminated, we still need a form for that person --- indicates their status as terminated. Also note whether or not the site sent the enrollment form directly to the Corporation for National Service. It is hoped that by now everyone understands that all forms (except health and child care) should come directly to the USDA Director of National Service and NOT--- repeat NOT --- the Corporation for National Service.

REMEMBER:

a. ALL members should be listed even though they only served a few days. If an enrollment form was submitted for a Member who then terminates either by officially notifying you or simply by walking away from the program, an End of Term of Service Form MUST be submitted for the Member.

b. If Members are serving at an operating site and their name does not appear on the list for that site, first check to see if the Member is listed under a different operating site; if not, then an Enrollment Form must be submitted so the person can be enrolled in the program.

c. List all the hours a Member served during the reporting period regardless if they terminated or if they started in the middle of the period.

6/04/96

10. MEMBER DATA:

OP SITE ID: Y45A
STATE: SC

Site Supervisor: Keith Cain
Agency/Org Name: Crossroads of History RC&D
City: Winnsboro , SC

PHONE: 803-635-2757
FAX: 8036352081

No. of Members Allocated by USDA: 4

Member Name		SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
FUNCHESS , LOLITA	M.	(b)(6)	F	A	A	520	520	520	____	1040
GUNDLER , KIMBERLY	M.		F	A	A	520	520	520	____	1040
KINARD , KAREN	E.		F	A	A	520	520	520	____	1040
SHEA , ERIC	A.		F	A	A	520	520	520	____	1040

Total Hours: 4160

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* The number of Members allocated should equal the number of active members, those members whose trust status is "A" and whose Program Status is "A". If your report shows five members with "A" "A" status and yet you only have four active members, this means you have not submitted an end of term of service form for the member for the member who is no longer active. Conversely, if your report shows five members with an "A" "A" status and you actually have six members active, you have not submitted an enrollment form for the active member whose name is not shown on this report. If that is the case, list the names, SSN, Status and hours of the missing members on this sheet and send the enrollment forms to the USDA Director of National Service. If enrollment form was sent directly to the Corporation, send copies to the USDA Director of National Service immediately. If you have replaced members be certain to indicate whether the replacements are full or part-time [NOTE: The USDA Director of National Service must approve conversion of full-time slots to part-time slots IN ADVANCE.]

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

6/04/96

10. MEMBER DATA:

OP SITE ID: Y45B
STATE: SC

Site Supervisor: Steve Edwards
Agency/Org Name: Lowcountry RC&D
City: Walterboro , SC

PHONE: 803-549-5596
FAX: 8035492597

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
DUFFY	, KIMBERLY	A.	(b)(6)	F	A	A			520	____	0
GREENE	, ERIK	N.		F	A	A	520	520	520	____	1040
MAULDIN	, MERIDITH	G.		F	A	A	520	520	520	____	1040
MCLEAN	, DOUGLAS	J.		F	A	A	520	520	520	____	1040
STEVENS	, SHERELL	.		F	E	II	520	320	—	____	840
									Total Hours:		3960

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* The number of Members allocated should equal the number of active members, those members whose trust status is "A" and whose Program Status is "A". If your report shows five members with "A" "A" status and yet you only have four active members, this means you have not submitted an end of term of service form for the member for the member who is no longer active. Conversely, if your report shows five members with an "A" "A" status and you actually have six members active, you have not submitted an enrollment form for the active member whose name is not shown on this report. If that is the case, list the names, SSN, Status and hours of the missing members on this sheet and send the enrollment forms to the USDA Director of National Service. If enrollment form was sent directly to the Corporation, send copies to the USDA Director of National Service immediately. If you have replaced members be certain to indicate whether the replacements are full or part-time [NOTE: The USDA Director of National Service must approve conversion of full-time slots to part-time slots IN ADVANCE.]

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

6/04/96

10. MEMBER DATA:

OP SITE ID: Y45C
STATE: SC

Site Supervisor: Jimmy Sanders
Agency/Org Name: Ninety Six RC&D
City: Greenwood , SC

PHONE: 803-229-2174
FAX: 8032292845

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
HOLCOMBE	, DAVID	E.	(b)(6)	F	A	A	520	520	520	____	1040
JOHNSON	, DANNY	E.		F	A	A	520	520	520	____	1040
PAULUS	, ANGILEEN	M.		F	A	A	520	520	520	____	1040
WILSON	, GEORGE	D.		F	A	A	520	520	520	____	1040

Total Hours: 4160

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* The number of Members allocated should equal the number of active members, those members whose trust status is "A" and whose Program Status is "A". If your report shows five members with "A" "A" status and yet you only have four active members, this means you have not submitted an end of term of service form for the member for the member who is no longer active. Conversely, if your report shows five members with an "A" "A" status and you actually have six members active, you have not submitted an enrollment form for the active member whose name is not shown on this report. If that is the case, list the names, SSN, Status and hours of the missing members on this sheet and send the enrollment forms to the USDA Director of National Service. If enrollment form was sent directly to the Corporation, send copies to the USDA Director of National Service immediately. If you have replaced members be certain to indicate whether the replacements are full or part-time [NOTE: The USDA Director of National Service must approve conversion of full-time slots to part-time slots IN ADVANCE.]

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

6/04/96

10. MEMBER DATA:

OP SITE ID: Y45D Site Supervisor: Wylie Owens PHONE: 803-393-980
Agency/Org Name: Pee Dee RC&D FAX: 8033956827
STATE: SC City: Darlington , SC

No. of Members Allocated by USDA: 4

Member Name	SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
BETHEA , JOAN .	(b)(6)	F	A	A	520	520	520	____	1040
BEVER , CHRISTOPHER R.		F	A	A	520	520	520	____	1040
CANNIF , SUZAN E.		F	A	~~A~~ C	0	320	—	____	320
KENNEDY , WILBERT .		F	A	A	520	520	520	____	1040
MORGAN , ANGELA C.		F	E	C	280	0	—	____	280

Total Hours: 3720

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* The number of Members allocated should equal the number of active members, those members whose trust status is "A" and whose Program Status is "A". If your report shows five members with "A" "A" status and yet you only have four active members, this means you have not submitted an end of term of service form for the member for the member who is no longer active. Conversely, if your report shows five members with an "A" "A" status and you actually have six members active, you have not submitted an enrollment form for the active member whose name is not shown on this report. If that is the case, list the names, SSN, Status and hours of the missing members on this sheet and send the enrollment forms to the USDA Director of National Service. If enrollment form was sent directly to the Corporation, send copies to the USDA Director of National Service immediately. If you have replaced members be certain to indicate whether the replacements are full or part-time [NOTE: The USDA Director of National Service must approve conversion of full-time slots to part-time slots IN ADVANCE.]

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

6/04/96

10. MEMBER DATA:

OP SITE ID: Y45E
STATE: SC

Site Supervisor: Roy Todd
Agency/Org Name: Santee-Wateree RC&D
City: Florence , SC

PHONE: 803-629-8784
FAX: 8036654136

No. of Members Allocated by USDA: 4

Member Name			SSN	SER STAT	PGM STAT	TRT STAT	HOURS 1st Rpt	2nd Rpt	3rd Rpt	4th Rpt	Total
BOSTIC	, VINCENT	R.	(b)(6)	F	A	A	520	520	520	____	1040
MCFADDEN	, DEBORAH	R.		F	E	C	272	0	520	____	272
MORGAN, III	, JOHN	E.		F	A	A	520	520	520	____	1040
WESTON	, ETHAN	N.		F	A	A	520	520	520	____	1040

Total Hours: 3392

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* The number of Members allocated should equal the number of active members, those members whose trust status is "A" and whose Program Status is "A". If your report shows five members with "A" "A" status and yet you only have four active members, this means you have not submitted an end of term of service form for the member for the member who is no longer active. Conversely, if your report shows five members with an "A" "A" status and you actually have six members active, you have not submitted an enrollment form for the active member whose name is not shown on this report. If that is the case, list the names, SSN, Status and hours of the missing members on this sheet and send the enrollment forms to the USDA Director of National Service. If enrollment form was sent directly to the Corporation, send copies to the USDA Director of National Service immediately. If you have replaced members be certain to indicate whether the replacements are full or part-time [NOTE: The USDA Director of National Service must approve conversion of full-time slots to part-time slots IN ADVANCE.]

REMEMBER, MEMBERS WHOSE FORMS HAVE NOT BEEN RECEIVED AT USDA ARE NOT CONSIDERED ENROLLED IN THE PROGRAM AND THEIR BENEFITS (EDUCATION AWARD,ETC.) ARE JEOPARDIZED!!!

11. Please list the total number of **volunteers** who took part in activities which were sponsored or organized by all the Members in the state during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
____	____	80	____	____

12. Please list the total number of hours of community service completed by the volunteers cited above during this period.

1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total
____	____	1800	____	____

SECTION IV - PROGRESS TOWARDS ACCOMPLISHING SERVICE OBJECTIVES:

13. Original Community Service Objectives: Attached are sheets summarizing the community service objectives that were originally approved for each operating site. In cases where a single objective may take an entire year to complete, that objective may have a sub-objectives listed. **You need to fill in the column marked "3rd QTR Quantity" and the column marked "3rd QTR Success" --- as well as any column that is blank, has a zero, or has a question mark --- for EVERY operating site.** Each chart should have the following columns:

"State" - The standard two-letter code for your state

"Obj No" - Each community service objective for each site is assigned an individual number

"Op Site" - Each site's unique operating site identification

"PGM Code" - Each type of service has been assigned a unique code to describe that type of service. See the appendix to this report entitled "Community Service PGM Code List"

"Obj/Impact Statement" - A few words verbally summarizing the community service objective

"Year's QTY Target" - The year's numerical goal for the people or things to be aided

"Target Unit of Measurement" - The unit of measure used in the previous column

"3rd QTR Quantity" - Provide a hard number indicating progress towards the "Year's QTY Target"

"Year's Success Target" - Number for a way of measuring *quality* of service provided --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"Success Unit of Measure" - Explanation of the number in the previous column --- if this column is blank, has a question mark , or has a zero, please replace it with the accurate information

"3rd QTR Success" - Provide a hard number indicating progress towards the "Year's Success Target"

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QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45A	1	EN-E092A	Conduct water quality assessments	8	assessments - water quality		500	Number of people who adopt measures	
SC	Y45A	10	EN-E109A	Land use planning	2	plans	1	100	% of plans implemented	100 %
SC	Y45A	11	EN-E089	Urban community facilities	2	acres - aided			% of work meeting professional standards	
SC	Y45A	12	EN-E012A	Environmental conservation education	13000	students - educated	2,000	90	% of students with increased knowledge	80 %
SC	Y45A	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland		10000	# of acres actually protected	
SC	Y45A	3	EN-E015A	Develop outdoor learning center	20	classrooms - outdoor	3	10	% increase in outdoor learning center use	10%
SC	Y45A	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed		50	% reduction in fire or insurance rate	
SC	Y45A	5	EN-E044A	Construct additional public access sites	5	structures - built		100	% of work meeting professional standards	
SC	Y45A	6	EN-R013A	Implement 911 emergency response system	10	counties - 911 system	1	10	# of roads inventories, signs posted, etc	200
SC	Y45A	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs		75	% decrease in erosion	

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QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45A	8	EN-E015A	Construct outdoor learning centers	25	classrooms - outdoor	3	50	% of students showing increased knowledge	50%
SC	Y45A	9	EN-E049B	Construct recreation sites	10	sites - constructed	1	100	% of sites meet professional standards	100%

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QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45B	1	EN-E092A	Conduct water quality assessments		assessments - water quality			Number of people who adopt measures	—
SC	Y45B	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland			# of acres actually protected	—
SC	Y45B	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	2	10	% increase in outdoor learning center use	50%
SC	Y45B	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	—		% reduction in fire or insurance rate	—
SC	Y45B	5	EN-E044A	Construct additional public access sites	5	structures - built	3		% of work meeting professional standards	100%
SC	Y45B	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	1		# of roads inventories, signs posted, etc	375
SC	Y45B	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	—	40	% decrease in erosion	—
SC	Y45B	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	2		% of students showing increased knowledge	70%
SC	Y45B	9	EN-E049B	Construct recreation sites	8	sites - constructed	1		% of sites meet professional standards	100%

QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45C	1	EN-E092A	Conduct water quality assessments		assessments - water quality	1		Number of people who adopt measures	100
SC	Y45C	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	600		# of acres actually protected	500
SC	Y45C	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	3	10	% increase in outdoor learning center use	10%
SC	Y45C	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed			% reduction in fire or insurance rate	
SC	Y45C	5	EN-E044A	Construct additional public access sites	5	structures - built			% of work meeting professional standards	
SC	Y45C	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	2		# of roads inventories, signs posted, etc	250
SC	Y45C	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs			% decrease in erosion	
SC	Y45C	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	3		% of students showing increased knowledge	90%
SC	Y45C	9	EN-E049B	Construct recreation sites	8	sites - constructed	2		% of sites meet professional standards	100%

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QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45D	1	EN-E092A	Conduct water quality assessments		assessments - water quality	—		Number of people who adopt measures	—
SC	Y45D	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland	—		# of acres actually protected	—
SC	Y45D	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor	1	10	% increase in outdoor learning center use	10%
SC	Y45D	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	—		% reduction in fire or insurance rate	—
SC	Y45D	5	EN-E044A	Construct additional public access sites	5	structures - built	1		% of work meeting professional standards	90%
SC	Y45D	6	EN-R013A	Implement 911 emergency response system		counties - 911 system	4		# of roads inventories, signs posted, etc	100
SC	Y45D	7	EN-E166A	Repair riparian areas	0	miles - riparian repairs	1		% decrease in erosion	50%
SC	Y45D	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	1		% of students showing increased knowledge	25%
SC	Y45D	9	EN-E049B	Construct recreation sites	8	sites - constructed	1		% of sites meet professional standards	100%

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QUESTION 13. PROGRESS TOWARDS ACOMMPLISHING ORIGINAL COMMUNITY SERVICE OBJECTIVES

(Under "3rd QTR Quantity" enter the amount of work done in the third quarter. Do the same for "3rd QTR Success".)

State	OP Site	Obj No.	PGM Code	Obj/Impact Statement	Year's QTY Target	QTY Unit of Measure	3rd QTR Quantity	Year's Success Target	Success Unit of Measure	3rd QTR Success
SC	Y45E	1	EN-E092A	Conduct water quality assessments		assessments - water quality	1		Number of people who adopt measures	250
SC	Y45E	2	EN-E036B	Conduct grassland assessments	1000	assessments - grassland			# of acres actually protected	
SC	Y45E	3	EN-E015A	Develop outdoor learning center	8	classrooms - outdoor		10	% increase in outdoor learning center use	
SC	Y45E	4	EN-R010A	Installation of dry fire hydrants	400	hydrants - installed	50		% reduction in fire or insurance rate	40%
SC	Y45E	5	EN-E044A	Construct additional public access sites	5	structures - built			% of work meeting professional standards	
SC	Y45E	6	EN-R013A	Implement 911 emergency response system		counties - 911 system			# of roads inventories, signs posted, etc	
SC	Y45E	7	EN-E166B	Repair riparian areas	0	miles - riparian repairs			% decrease in erosion	
SC	Y45E	8	EN-E015A	Construct outdoor learning centers	8	classrooms - outdoor	1		% of students showing increased knowledge	75%
SC	Y45E	9	EN-E049B	Construct recreation sites	8	sites - constructed	2		% of sites meet professional standards	100%

14. PROGRESS TOWARDS ACCOMPLISHING ADDITIONAL COMMUNITY SERVICE OBJECTIVES

Use this section to report progress towards completing additional new objectives --- those objectives in addition to the main objectives of each project listed on the proceeding page. Please fill in all columns for all objectives. It is important to make sure that each objective is listed with its own "OP site" (Operating site) code; this ensures that we know precisely what service is performed at each site. Please fill in all columns for each objective. Under "Obj No.," please give each new objective a number different from the number used for any of the objectives on the proceeding page. Under "PGM Code", please use a one-letter and three-digit code to describe the service from the code list provided at the end of this report. Under "Obj/Impact statement," provide a several-word summary of the nature of the service project -- this verbal summary should roughly match the "PGM Code" listed in the previous column. Under "Year's QTY Target," provide a hard number for the people or things aided. Under "Target Unit of Measurement," specify what unit of measure was used in the previous column -- such as miles, number of people served, acres, etc. Under "1st QTR Quantity," provide a hard number indicating progress towards the "Year's QTY Target" that was accomplished during this reporting period. Under "Year's Success Target," provide a hard number for a way of measuring how well the service was provided. Under "Successes Unit of Measure," specify exactly what the number in the previous column meant. Under "I st QTR Success," provide a hard number indicating progress towards the "Year's Success Target" that was accomplished during this reporting period.

State	Op Site	Obj No.	PGM Code	Obj/Impact statement	Year's QTY Target	Year's QTY Unit of Measure	1st QTR Quantity	Success Target	Unit of Measure	1st QTR Success
{SAMPLE:}										
CA	Y05A	18	EN96	Constrcuting whale nesting boxes	3	Boxes	1	90	%	meeting stand. 95%

15. Community Service Objectives Narrative (optional):

The South Carolina Rural Development AmeriCorps Project's Greenwood Team (45C) worked at John de la Howe School for Boys in McCormick County during April. They assisted a variety of organizations and agencies to develop an interpretative trail approximately 1.5 miles in length. The trail will provide outdoor learning opportunities for students at this residential school as well as for students in surrounding counties.

In an effort to install a 911 emergency assistance programs, the Darlington Team (45D): gathered data and loaded it into a computer for 3, 930 land parcels in Hartsville, SC. ; they completed renumbering for approximately 6,200 residents in Cheraw, SC; and verified addresses on over 200 residents in Dillon County. As part of a community service project, they completed a Down Town Development survey in Bennetsville, SC.

The Walterboro team (45B) is reaching millions of South Carolinians with their work. The Folly Beach Nature Trail will benefit over 10,000 visitors annually to the County Park! The City of Beaufort, SC Tree Inventory will benefit over 8,000 residents. And recent work on the Berkeley County Boat landing will benefit over 50,000 recreationist annually! The SC Rural Development team is making itself known!!!!!

The Winnsboro Team (45A) developed an Education Guide for teachers in Lexington County. They assembled lesson plans into grades K-5, 6-8, and 9-12. This will help teachers teach thousands of students annually about natural resources, because they were able to enter each lesson into a computer database. They also completed maps of a courtyard and a naturewalk at Keels Elementary. 80 different species of plants and trees were labeled. 62 raised beds were mulched at Summit Parkway School. 6 benches were built at an outdoor education site at Rice Creek School. 1, 500 students will benefit! The team also completed a take-home activity book for personal education and safety. They also conducted group class lessons which benefited 500 students. At Dent Middle School, they cleared an access trail to a wetland and assembled 230 "Take Home Science Bags" for 2nd graders.

16. Community Building Narrative (optional): AmeriCorps work at the John de la Howe School (45C)helped improve an already outstanding institution. The school operates a widely respected wilderness program available to children who are in need of special attention in learning to cope with factors of everyday life. The trail which AmeriCorps built will provide years of valuable outdoors education for thousand of visitors. The interpretive trail will complete the wilderness program in meeting the needs of special children.

The Outdoor Classroom at Bennetsville Middle School (45D) brought together school personnel, City officials, county employees, school board members, Pee Dee RC&D Council, NRCS, Forestry Commission, Clemson Extension Service, and 5 local industries to accomplish a $10,000 project with NO outside money or assistance.

17. **AmeriCorps Member Development Objectives (optional)**

The Darlington AmeriCorps team (45D) worked with different teachers, school board members, agency personnel, local businesses, and industries, and units of government to complete their projects. They learned how to "get things done" in a small rural community and how all the members of a county can contribute to "getting things done".

The Walterboro team (45B) was exposed to migrant headstart classrooms. They learned about the hardships that some migrant families endure, and this helped them to appreciate their own lives a bit more.

The Santee Wateree AmeriCorps team (45E) worked with the Dry Hydrant, Rural Fire Protection Program in a two county area. They benefited in many ways: Learned new technical skills, improved organizational skills, their work ethic was greatly improved, and their human relations skills have benefited.

18. Unique Success or Great Stories:

The MARSH project (45B) enlisted over 30 partnerships of local, state, and federal agencies. The MARSH dedication ceremony was a huge success and was covered by Channel 12 (North Augusta) TV and several local newspapers. Each AmeriCorps member received a plaque and letter of appreciation and much recognition during the ceremony.

19. Difficulties Faced by the Program:

In the words of team leader Doug McLean (45B): *"There are no problems-- Only new learning experiences!"*

20. National Identity Activities:

The Greenwood AmeriCorps Team (45C) supported the Ninety Six National Historic Site on May 3, 1996 in preparation for a historical re-enactment of a Revolutionary War Battle fought in a unique star-shaped fort.

On June 19, 1996, the Greenwood Team met with other USDA members from Asheville, NC for an information exchange session.