

**COUNTY OF SANTA CLARA
 PERFORMANCE MEASUREMENT WORKSHEET
 FY 2010/2011**

All applicants must complete this worksheet. *For more information on how to complete this section, see pages 12 - 14 of INSTRUCTIONS.*

DATE PREPARED: _____

Agency Name:	Project Title:	Category _____ Housing - or - _____ Public Service	
Goal:			
Objective 1.	Outcome	# to be served	Unit Type <i>(individuals, housing units, etc.)</i>
Objective 2.	Outcome	# to be served	Unit Type
Objective 3.	Outcome	# to be served	Unit Type