Name of County Network
Reporting Period: _______1, 20XX to _______ 30/31, 20XX

County Network Board or Executive Team Members:
Name, Title, Organization/Affiliation
Name, Title, Organization/Affiliation

Personnel/Consultants:
Name, Title (e.g. Network Coordinator), Part-time/Full-time

Contributions to the NST Partnership During the Reporting Period:
Narrative form – tell us your story!

Focus Area/Initiative Activities During the Reporting Period:
Narrative form – tell us your story, and include the following information!
E.g. Kindergarten Readiness
   Activities/Work/Progress, etc.
   Status/Progress/Outcomes/Results

E.g. Post-Secondary Success
   Activities/Work/Progress
   Status/Progress/Outcomes/Results

Initiative Success Indicator:
Clearly document at least one current, active initiative that is working towards achieving one or
more county success indicators (e.g. increased students ready for kindergarten, or increased
number of students who graduate high school having completed A-G requirements, etc.) as well
as the data to show progress toward the success indicator;

County Network Activities During the Reporting Period:
Narrative form – tell us your story!
E.g. Meetings/Stakeholder Recruitment/Prof. Dev./Roadmap Work

Notable Accomplishments During the Reporting Period:
Narrative form – tell us your story!

Challenges Faced During Reporting Period:
Narrative form – tell us your story!

On the Horizon:
Narrative form – tell us your story!

What Can NST Do to Help?

Attach  Appendix A - County Network Financial Progress Report
        Appendix B - Best Practice Form(s)
        Appendix C - Current County Network Roadmap and Data Indicator Tracking