Appendix A Continuing Improvement 2021-22

Agency Name:				Project Number:	
Program Name:					
<i>Reason(s) for the change:</i> Shift in program operation	days.				
This change includes:	□ <u>Additions</u>	□ Deletions	√ Both		
Narrative Language:					

<u>Underscore</u> reflects additions to the previous narrative. Cross-out reflects deletion of language in the previous narrative.