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| TITOLO PROGETTO |  |
| REFERENTE DEL PROGETTO |  |
| OPERATORE DELLO SPORTELLO |  |
| SEDE OPERATIVA |  |
| PERIODO | DAL ../../2019 AL ../../2019 |

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**BANDO *PORTIERATO SOCIALE***

**SCHEDA DI VALUTAZIONE TRIMESTRALE**

**ANALISI DEI DATI QUALITATIVI**

**MACRO DESCRIZIONE DEI DESTINATARI (max 300 parole)**

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**DESCRIZIONE DELLA SITUAZIONE INIZIALE (max 300 parole)**

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**AZIONI E INIZIATIVE MESSE IN ATTO (DALL’ORGANIZZAZIONE E DAI CONDOMINI STESSI)**

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**CRITICITÀ AFFRONTATE E AZIONI MESSE IN ATTO** (max 300 parole)

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**SCHEMA DEI RISULTATI ATTESI (in base ai risultati indicati nella proposta progettuale)**

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**DESCRIZIONE DELLA SITUAZIONE ATTUALE (max 300 parole)**

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**RAPPORTI CON LA COMUNITA’ (max 300 parole)**

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**ANALISI DEI DATI QUANTITATIVI**

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| **ORARIO DI LAVORO** |  |
| **GIORNATE DI PRESENZA** |  |
| **NUMERO DI PASSAGGI ALLO SPORTELLO** |  |
| **NUMERO DELLE PERSONE CHE HANNO PARTECIPATO ALLE SEGUENTI INIZIATIVE** |  |
| **“Iniziativa 1”** |  |
| **“Iniziativa 2”** |  |
| **NUMERO DI RICHIESTE DI INTERVENTO** |  |
| **NUMERO INTERVENTI EFFETTUATI DAI CONDOMINI DEL QUARTIERE** |  |