



## Strategic Highway Safety Plan (SHSP) Inventory of Safety Projects and Programs

We are collecting information on existing safety projects and programs within Texas as part of the State's Strategic Highway Safety Planning effort. This information will be used to identify a base level of safety activity, identify gaps in our current efforts and help safety professionals determine what other efforts might be needed.

**Please use a separate page for each project/program.**

Agency or Organization Name: \_\_\_\_\_

Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

May we post your contact information on the SHSP website ?                      Yes                      No

<b>Project or Program Name:</b>		
<b>Project or Program Website:</b>		
<b>Please provide a brief 1-sentence description of the actions or tasks that make up this project or program.</b>	<b>What are the primary goals or objectives of this project or program?</b>	
<b>Does this project or program address any of these crash issue categories? Select all that apply.</b>		
Distracted Driving	Pedestrian Safety	Motorcycle Safety
Impaired Driving	Roadway & Lane Departures	Occupant Protection
Intersection Safety	Speeding	Other Safety Category
Older Road Users	Bicycle Safety	Please specify: _____
<b>What geographic location does this project or program target? Select all that apply.</b>		
City. Please specify: _____		
County. Please specify: _____		
Region. Please specify: _____		
State. Please specify: _____		
Native American Territory. Please specify: _____		
Other. Please specify: _____		
<b>How are you measuring this project or program implementation? Select all that apply.</b>		
Number of intersections treated. How many? _____		
Number of miles treated. How many? _____		
Number of officer-hours of enforcement. How many? _____		
Number of people trained/educated. How many? _____		
Number of people contacted. How many? _____		
Number of crashes or injuries reduced? How many? _____		
Other measure or effort. Please specify: _____		
<b>What is the current status of this project or program?</b>		
Planned, but not started. Anticipated start date: _____		
Underway. Anticipated completion date: _____		
Ongoing (Annual Program) : _____		
Complete, no current activity. Completion date: _____		