# CHILD PLACEMENT AGENCY REPORT

**Provider Organization:** The Martin Pollak Project, Inc.

**Licensing Agency:** DHS

**Contracting Agency(s):** DHS

**Name of Chief Administrator:** Richard Norman

**Email:** norman@mppi.org

**License Type:** TFC

**Type of Inspection:** Quarterly

<table>
<thead>
<tr>
<th>Name and Address of CPA Office</th>
<th>License Capacity</th>
<th>DHS Contract Limit</th>
<th>Census by Placing Agency</th>
<th>License#/ Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Martin Pollak Project, Inc. 3701 Eastern Avenue Baltimore, MD 21224</td>
<td>Unlimited</td>
<td>80</td>
<td>44</td>
<td>#00046 06/25/2020</td>
<td>12/31/2018</td>
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</tbody>
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## Inspection Summary

**Number of Records Reviewed:** Youth 0  Staff 8  Foster Parent 0  Adoptive Parent N/A

**Number of Interviews:** Youth 0  Staff 0  Foster Parent 0

**CPA Office Inspection:** Approved

**Number of ILP Apartments Inspected:** 0  
**Number of Foster Homes Inspected:** N/A

**Current COMAR Violation:** Yes X No ___

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
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</table>

**Corrective Action Plan:** Yes ____ No X  
If yes, date of CAP:

**Any Violations During Mid or Re-Licensure Periods:** Yes ____ No ___

If Yes See Report (s) Date(s):

**Complaint Outcome:** NA

**Current Status of License:** Continued

**Licensing Coordinator:** Sherlema Ferguson  
**Date:** 1/8/19  
**Email:** sherlema.ferguson@maryland.gov

**Program Manager:** Richard Berger  
**Date:** 1/8/19  
**Email:** richard.berger@maryland.gov