

Leveraging Educational Assistance Partnership (LEAP) and Special Leveraging Educational Assistance Partnership (SLEAP) Programs Performance Report

Award Year: State:

READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM

PART I: General Student Assistance Information

Total state (non-Federal) expenditures for grants and work-study jobs for students (415C(b)(6)&(10) and 415E(e)&(f), HEA) in the July 1, 2008 to June 30, 2009 reporting period:

- (a) Total state-appropriated funds spent for need-based awards:
- (b) All other state funds spent for need-based awards:
- (c) Total state funds spent for non-need based awards:
- (d) TOTAL State Aid (a+b+c)

PART II: LEAP Information

Section A: LEAP Grant Expenditures by Type of Institution

Type of Institution		Dependent Student Recipients		Independent Student Recipients		
		Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds
Public:	2-year					
	4-year					
Private Nonprofit:	2-year					
	4-year					
Other Nonprofit: (Public or Private)						
Proprietary: (For-Profit)						
Totals						

Section B: LEAP Community Service Work-Study Expenditures by Type of Institution

Type of Institution		Dependent Student Recipients		Independent Student Recipients		
		Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds
Public:	2-year					
	4-year					
Private Nonprofit:	2-year					
	4-year					
Other Nonprofit: (Public or Private)						
Proprietary: (For-Profit)						
Totals						

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Section C: LEAP Expenditures by Income Level - All Student Recipients

LEAP expenditures (both Federal and state) for grants and community service work-study jobs by income level of recipients ("Income level of recipient" means family income of dependent or independent students, as used to compute the student's financial need).

Income Level of Recipient	Dependent Student Recipients			Independent Student Recipients		
	Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
\$ 0 to \$ 19,999						
\$ 20,000 to \$ 39,999						
\$ 40,000 and Over						
Totals						

Section D: LEAP Recipient Information

- Did your state award LEAP funds to graduate students during the report period? Yes No
- Check each student enrollment status box in which a student may be eligible to receive LEAP Program funds.
 Full Time Three Quarter Time Half Time Less than Half Time
- The following grid is used to determine whether a state made a reasonable proportion of LEAP funds available to less-than-full-time students if your state's allocation was based in part on the financial need demonstrated by less-than-full-time students. If only full-time students were eligible to receive LEAP funds in your state, you do not need to complete the grid.

Enrollment Status of Recipient	Dependent Student Recipients			Independent Student Recipients		
	Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
Full-Time						
3/4 Time						
1/2 Time						
Less Than 1/2 Time						
Totals						

PART III: SLEAP Information

Section A: SLEAP Maintenance-of-Effort (MOE) and Authorized Activities

1. Total state expenditures for postsecondary activities that meet the definition of the SLEAP authorized activities for the 2008-2009 award year:

2. Indicate each need-based authorized activity your state selected to be part of its SLEAP Program (Federal and non-Federal funds) for the 2008-2009 award year:

- (a) LEAP Grant Awards Supplement
- (b) LEAP Community Service Work-Study Awards Supplement
- (c) Merit, Academic Achievement, or Critical Careers Scholarships

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Section B: SLEAP Grant Expenditures by Type of Institution

Type of Institution		Dependent Student Recipients			Independent Student Recipients		
		Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
Public:	2-year						
	4-year						
Private Nonprofit:	2-year						
	4-year						
Other Nonprofit: (Public or Private)							
Proprietary: (For-Profit)							
Totals							

Section C: SLEAP Community Service Work-Study Expenditures by Type of Institution

Type of Institution		Dependent Student Recipients			Independent Student Recipients		
		Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
Public:	2-year						
	4-year						
Private Nonprofit:	2-year						
	4-year						
Other Nonprofit: (Public or Private)							
Proprietary: (For-Profit)							
Totals							

Section D: SLEAP Expenditures by Income Level - All Student Recipients

SLEAP expenditures (both Federal and state) for grants and community service work-study jobs by income level of recipients ("Income level of recipient" means family income of dependent or independent students, as used to compute the student's financial need).

Income Level of Recipient	Dependent Student Recipients			Independent Student Recipients		
	Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
\$ 0 to \$ 19,999						
\$ 20,000 to \$ 39,999						
\$ 40,000 and Over						
Totals						

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Section E: SLEAP Recipient Information

1. Did your state award SLEAP funds to graduate students during the report period? Yes No
2. Check each student enrollment status box in which a student may be eligible to receive SLEAP Program funds.

Full Time
 Three Quarter Time
 Half Time
 Less than Half Time

Enrollment Status of Recipient	Dependent Student Recipients			Independent Student Recipients		
	Number of Dependent Recipients	Total Federal Funds	Total State Funds	Number of Independent Recipients	Total Federal Funds	Total State Funds
Full-Time						
3/4 Time						
1/2 Time						
Less Than 1/2 Time						
Totals						

FREQUENCY OF REPORT

The Leveraging Educational Assistance Partnership and Special Leveraging Educational Assistance Partnership Programs Performance Report is submitted once a year.

This report covers your FY 2008 allotment(s) used for student awards between July 1, 2008 and June 30, 2009.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0028. The time required to complete this information collection is estimated to average two hours (or minutes) per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to:

Financial Partners Services, Federal Student Aid, U.S. Department of Education, 830 First Street, N.E., 111H1, Washington, D.C. 20202.

NOTE: Further monies or other benefits may be withheld unless this report is completed and filed as required by existing law (20 U.S.C. 1070c-2)

PART IV: Certification by Authorized Official of Agency *Save and print completed form for your records.*

Upon submission, I CERTIFY that the information provided in this Performance Report is based upon information reflected in the official accounting and program records of this agency. Upon request, such records will be made available to the Secretary or his delegate for review. I hereby release to the U.S. Department of Education for deobligation the difference between the total expenditure of LEAP Federal funds reported in Part II, Section C above and the LEAP amount awarded to this state for expenditure in this reporting period. In addition, I hereby release to the U.S. Department of Education for deobligation the difference between the total expenditure of SLEAP Federal funds reported in Part III, Section D above and the SLEAP amount awarded to this state for expenditure in this reporting period.

Document Signature Field _____

SIGNED and SUBMITTED BY (TYPE NAME and TITLE):