# U.S. DEPARTMENT OF EDUCATION Washington, D.C. 20006

# GRADUATE ASSISTANCE IN AREAS OF NATIONAL NEED (GAANN) PROGRAM (Title VII, Part A, Higher Education Act of 1965, as amended) INSTRUCTIONS FOR COMPLETING THE FINAL PERFORMANCE REPORT

### DISCLOSURE OF BURDEN STATEMENT

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0748 and the expiration date is XX/XX/XX. The time required to complete this information collection is estimated to average 10.5 hours per response, including the time to review instructions, search existing data resources, gather needed data, 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, DC 20202-4651. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** The Graduate Assistance in Areas of National Need Fellowship Program, U.S. Department of Education, 1990 K Street, N.W., Washington, DC 20006-8524.

#### GENERAL INFORMATION

Reporting Requirements – The GAANN program requires the submission of the Annual Performance Report (APR) and the SF 269 Financial Status Report by April of each year. The Fiscal Year XXXX APR and the SF 269 Financial Status Report (FSR) must be submitted by Friday, XXXXX. Failure to submit these reports by the required deadline may jeopardize future funding. **The final performance report and the SF 269 report for expired projects must be submitted 90 days after the end of the final budget period.** Submission of these reports is required under the Education Department General Administrative Regulations (EDGAR) volume 34 CFR 74.51, 75.590, 75.720, and 75.730-732.

<u>Format of performance report</u> – You must complete and submit the report electronically. Prior to submitting the report, you will receive a letter containing the web address with instructions for completing the report online.

### **DEFINITIONS**

<u>Budget Period</u> - A one-year interval of time within a project period, which exists for budget reporting purposes.

<u>Project Period</u> - The three-year period of time that is the total length of the GAANN grant.

<u>Cumulative</u> – From the grant's first budget period to date.

Note: Future funding or other benefits may be withheld under this program unless all required reports are completed and filed as mandated under the U.S. Code of Federal Regulations

# GAANN PROGRAM FINAL PERFORMANCE REPORT FISCAL YEAR XXXX - XXXX

# **Section I: Grantee Information Instructions:** Please complete all information requested in this section. **General Information** Grant Number: P200A Institution Name: \_\_\_\_\_ Department/Program: \_\_\_\_\_ Highest degree awarded in the course of study: O Master's Degree O Doctorate Degree Address: \_\_\_\_\_ City, State, Zip Code: Contact Person: Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email Address: Budget Period:

Performance Data		
Total number of GAANN fellowships of Department.	originally awarded to the recipient	Self populate
Total number of GAANN fellowships a GAANN funds this budget period.	warded to fellows only using fede	ral
Total number of GAANN fellowships a matching/cost-share funds this budget p		
Total number of GAANN fellowships a combination of matching/cost-share fund budget period (if none, enter zero).	9	3
Fiscal Data		
<u>Instructions:</u> Enter data for 1) the budg	et period and 2) the cumulative bu	dget for this project.
	<b>Budget Period</b> (funds spent from May 1 – April 30)	Cumulative Budget (from grant inception to current date)
Federal funds expended	\$	\$
Matching/cost-share funds expended	\$	\$
Federal funds remaining	\$	\$

# **GAANN Final Performance Report Section II: Individual Fellow Data**

**Instructions:** The electronic report will prompt you to complete the information requested in this section. You will be required to enter the requested data into the system for each individual GAANN fellow.

General Info	ormation	
1) Fellow's N	ame:Last Name	First Name
2) Institution	:	
3) Departmei	nt:	
4) Grant Awa	ard Number:	
5) Gender:	O Male	O Female
6) Is the fello	w a U.S. Citizen or Pern	nanent Resident?
	O Yes	O No
7) Year and t	term fellow entered insti	tution's graduate program.
	Term	Year
8) Ethnicity (	(Select one)	Race (Select one or more)
O Hispa	nnic or Latino	O American Indian or Alaska Native
O Not H	Hispanic or Latino	O Asian
		O Black or African American
		O Native Hawaiian or Other Pacific
Islander		
		O White
Program of	Study	
,	udy (Check/Select one) ow's designated GAANN	field of study.
O Biology		O Educational Assessment, Evaluation and
O Chemistry		Research
O Computer a	and Information Sciences	O *Geological and Related-Sciences
O Engineerin	g	O Interdisciplinary
		O Mathematics

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O Multidisciplinary	O Physics
O Nursing	

\*Geological and Related Sciences is no longer a funded field

10) Sub-discipline
Enter the most commonly used name for the fellow's sub-discipline. For example: biochemistry, civil engineering, organic chemistry.
Status
11) What is the fellow's current education status? (Check/Select one)
Master's Degree programs:
O Is enrolled
O Has received Master's degree
If fellow has received Master's degree, specify month and year of graduation
Month Year
O Left for academic reasons
O Left for non-academic reasons (personal or other reason)
O Other (state reason)
Doctorate Degree programs:
O Is enrolled but not yet advanced to Ph.D. candidacy
O Left graduate school after completing Master's degree
O Has passed prelims and advanced to Ph.D. candidacy
O Has received Ph.D.
If fellow has received Ph.D., specify month and year of graduation
Month Year
O Left for academic reasons
O Left for non-academic reasons (personal or other reason)
O Other (state reason)
12) If the fellow has graduated, what is the fellow's employment status? (Check/Select one)
O Tenure-track teaching job
O Visiting teaching job
O Post-doctoral fellowship

OPrivate Industry

OWorking in government agency
OWorking in other setting

## **Supervised Teaching Experience**

O Yes O No  Please provide a description of the experience in the text box below.  If fellow has not completed the supervised teaching experience, please state when this requirement will be fulfilled. Note: If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three	effective teacl	e information in the text box below how you were able to comply with the ulatory requirements: (1) providing the fellow with adequate instruction on hing techniques; (2) providing extensive supervision of each fellows teaching and (3) providing adequate and appropriate evaluation of the fellow's ormance.
If fellow has not completed the supervised teaching experience, please state when this requirement will be fulfilled. Note: If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three	O Yes	O No
<b>requirement will be fulfilled. Note</b> : If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three	Please provide	a description of the experience in the text box below.
<b>requirement will be fulfilled. Note</b> : If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three		
<b>requirement will be fulfilled. Note</b> : If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three		
<b>requirement will be fulfilled. Note</b> : If the Fellow has completed his/her supervised teaching experience prior to receiving a GAANN fellowship, please specify how they met the three		
regulatory requirements referenced above.		

#### **Financial Need**

Financial need is determined each year on the basis of the requirements for need analysis prescribed by Title IV, Part F of the Higher Education Act of 1965, as amended. Please consult your institution's financial aid office for information or questions regarding the determination of financial need. Please note that, for GAANN purposes, tuition and fees are excluded from the fellow's cost of attendance (COA) in most every case because the fellowship includes an institutional payment that is provided in lieu of tuition and fees normally charged to the student. The preferred method for calculating the COA and thus, financial need for a GAANN Fellow is to exclude tuition and fees because of the institutional payment. However, an institution may need to report the tuition and fees amount as part of COA under certain circumstances, such as a State's requirement that even waived tuition charges must be posted to the student's account. In this situation, the amount of the institutional payment must be included as part of the amount that goes to meet that fellow's financial need. How an

institution determines a GAANN Fellow's COA can affect reporting of financial need and the resources used to meet that need.

	That was the total COA for the current year? Enter the COA at the time of the fellow's need etermination for the current year.
	\$
	f tuition and fees were added to the COA, please enter the amount of tuition and fees for the ellow for the academic year.
	\$
	t the time of need determination, what was the fellow's expected family contribution (EFC) their education?
	\$
17) W	That was the fellow's financial need at the time of need determination?
	\$
	Financial need = Total COA – tuition and fees (if they were included in determining a fellows cial need) – EFC
Fellov	w's Stipend
18) W	That is the source of this fellow's GAANN fellowship? (Check one)
	O Entirely from federal GAANN funds
	O Entirely from matching/cost-share funds
	O Combination of federal GAANN and matching funds
an a	What is the amount of the fellow's <u>stipend</u> for the current funding year? This is the <u>stipend</u> mount provided directly to the fellow from either federal GAANN funds, matching/cost-share funds, or combination federal GAANN funds and matching/cost-share funds. Remember the fellow's stipend hould not exceed a fellow's financial need.
	\$
If	the fellow's stipend does not equal demonstrated level of need, please state the reason.

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20) Please provide a dollar value and narrative summary of the benefits provided to the institutional payment and/or matching/cost-share funds. This includes tuition a	
Previously Funded GAANN Fellows	
<b>21) Please describe the type of support currently being provided to this fellow</b> . Instituto provide two additional years of support to GAANN fellows (through fellowships, as If the fellow has left the program or completed the course of study and received the may be left blank.	ssistantships, etc.).