

Grantee:

Report: [Year] Final Report

[Grant Number] - [Year] Final Report

1. PR/Award Grant:
2. Program:
[Comprehensive & Special Focus]
3. Institutional Name & Address:

4. Project Title:

5. US Project Director / Contact Person:

Name:

Title:

Address

:

Phone:

Fax:

Email:

6. Performance Reporting Period:

7. Current Budget Period:

8. Authorized Representative:

Name:

Title:

Phone

:

I. Project Description

Project Title:

Abstract:

Online References: [URL]

Subject Categories:

Contacts:

Expense	(1) Original Budget [Start Date] [End Date]	(2) Expenditures [Start Date] [End Date]	(3) Estimated Balance
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A. Administrative Costs

1. Personnel	\$0
2. Fringe Benefits	\$0
3. Travel	\$0
4. Equipment	\$0
5. Supplies	\$0
6. Contractual	\$0
7. Construction	\$0

8. Other			\$0
B. Language Stipends (EC-US, US-Brazil, North American projects only)			\$0
C. Mobility Stipends (EC-US, US-Brazil, North American projects only)			\$0
D. Indirect Costs			\$0
E. Training Stipends or Scholarships			\$0
Total	\$0	\$0	\$0

Project Cost Share Totals Provided by Institution (and Partners if applicable)

Expense	(1) Original Budget [Start Date] [End Date]	(2)Expenditure s		(3)Estimated Balance
		[Start Date]	[End Date]	
A. Administrative Costs				
1. Personnel				\$0
2. Fringe Benefits				\$0
3. Travel				\$0
4. Equipment				\$0
5. Supplies				\$0
6. Contractual				\$0
7. Construction				\$0
8. Other				\$0
B. Language Stipends (EC-US, US-Brazil, North American projects only)				\$0
C. Mobility Stipends (EC-US, US-Brazil, North American projects only)				\$0
D. Indirect Costs				\$0
E. Training Stipends or Scholarships				\$0
Total		\$0	\$0	\$0

Section 1 - Financial Data

1 Did your organization expend more than \$500,000 in Federal funds during the last fiscal year?

Yes No N/A

2 When was your most recent OMB Circular A-133 audit?

Fiscal Year:

3 Were there any findings under your most recent audit?
 Yes No N/A

4 Have all the findings been resolved through corrective actions?
 Yes No N/A

5 Does your organization maintain time distribution records for each employee to account for the total activity for which an employee is compensated from the present grant award?
 Yes No N/A

6 Does your organization have procedures in place to minimize the time elapsing between the transfer of funds to your organization by a Federal agency and your organization's expenditures of such funds?
 Yes No N/A

7 Does your organization have a current negotiated indirect cost rate agreement?
 Yes
 No

Negotiated indirect cost percentage rate (please do not include the "%" sign): __
Expiration Date:

8 Total funds expended for for-profits? (No commas)
Equipment: \$ __

Consultants: \$ __

Contractual: \$ __

9 Total funds expended for scholarships and stipends? (No commas)
Scholarships: \$ __ Stipends: \$ __

Section 2 - Performance Data

1a Was there a change in the project director this year?
 Yes
 No

1b If you answered "Yes" to question 1a, please write in the name and phone number of the new project director.

2a Is one of the stated objectives of your project to increase access to an institution, program, field, or discipline?
 Yes
 No

2b Whether it is a stated objective or not, has your project resulted in increased access to an institution, program, field, or discipline?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

If you answered "No" to question 2b, please go to question 3a.

2c Has increased access to an institution, program, field, or discipline become a sustained activity at the end of the grant?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

3a Is one of the stated objectives of your project to increase student retention in an institution, program, field, or discipline?

- Yes
- No

3b Whether it is a stated objective or not, has your project resulted in increased student retention in an institution, program, field, or discipline?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

If you answered "No" to question 3b, please go to question 4a.

3c Has increased student retention in an institution, program, field, or discipline become a sustained activity at the end of the grant?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

4a Is one of the stated objectives of your project to control costs of, or produce cost savings in, higher education?

- Yes
- No

4b Whether it is a stated objective or not, has your project resulted in cost control or cost savings in any way?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

If you answered "No" to question 4b, please go to question 5a.

4c Please provide examples of the cost control or cost savings brought about by your project:

4d Has cost control or cost savings become a sustained activity at the end of the grant?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

5a Is one of the stated objectives of your project to train faculty or staff?

- Yes
- No

5b Whether it is a stated objective or not, has your project trained faculty or staff?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

If you answered "No" to question 5b, please go to question 6a.

5c If you answered "Yes" to question 5b, has faculty or staff training become a sustained activity at the end of the grant?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

6a Is one of the stated objectives of your project to improve student learning?

Yes
 No

6b Whether it is a stated objective or not, has your project improved student learning?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

If you answered "No" to question 6b, please go to question 7a.

6c Briefly explain how your project improved student learning and how you measured this improvement:

6d Have the activities in your project that improve student learning become sustained at the end of the grant?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

7a Has your project involved the implementation of an innovative practice in postsecondary education?

Yes
 No

If you answered "No" to question 7a, please go to question 8.

7b Briefly describe the innovation:

7c Will this innovative practice be sustained at the end of the grant?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

7d Have any other institutions or organizations expressed interest in using this innovative practice?

Yes
 No
 Too soon to say (annual reports only)
 Not sure

If you answered "No" to question 7d, please go to question 8.

7e How many institutions expressed interest in using this innovative practice since the beginning of the grant?

Total: _

7f Has the innovation been used at a site (campus or organization) other than at the grantee organization?

- Yes
- No
- Too soon to say (annual reports only)
- Not sure

If you answered "No" to question 7f, please go to question 8.

7g How many institutions or organizations have used this innovation since the beginning of the grant?

Total: _

8 How many institutions or organizations were involved at the beginning of the project, including the grantee?

Total: _

9a Have any additional institutions or organizations become involved in the project since the beginning of the grant?

- Yes
- No

If you answered "No" to question 9a, please go to question 10a.

9b How many additional institutions have become involved in the project since the beginning of the grant?

Additional number: _

10a Have any institutions or organizations expressed interest in materials or other results of the project?

- Yes
- No

If you answered "No" to question 10a, please go to question 11.

10b How many institutions or organizations expressed interest in materials or other results of the project?

Total: _

11 Did your project receive or involve any of the following since the beginning of the grant? (check all that apply)

- On-going costs included in operating budget
- New courses officially approved
- New programs officially approved
- Changes in curriculum
- Changes in the approaches to teaching
- Changes in written institutional policies or procedures
- Additional faculty FTE added to operating budget through non-FIPSE funds
- Additional staff FTE added to operating budget through non-FIPSE funds
- Not applicable
- Other (Please write in other)

12a Has your project received any additional funding (external or internal) since the beginning of the project?

- Yes
- No

If you answered "No" to question 12a, please go to question 13a.

12b What kind of additional funding has it received? (check all that apply)

- Additional in-kind contribution
- Additional institutional funding
- Additional federal funding
- Additional state funding
- Additional funding from for-profit firm
- Additional funding from private foundation
- Other (Please write in other)

13a Has your project received any press coverage since the beginning of the project?

- Yes
- No

If you answered "No" to question 13a, please go to question 14a.

13b Please indicate the kind of press coverage your project has received. (check all that apply)

- International media coverage
- National media coverage
- Local media coverage
- Institutional/organizational publication
- National association or trade association publication
- Other

14a Has your project won any awards since the beginning of the grant?

- Yes
- No

If you answered "No" to question 14a, please go to question 15.

14b Please write in the name, date, source, and, if applicable, the amount of each award.

15 Please list the kinds of activities, products, and resources resulting from your project since the beginning of the grant. (Check all that apply)

- Project-based conferences or symposia
- Conference presentations
- Course modules
- Project-specific Web site
- Textbooks
- Software programs
- Conference proceedings
- Books
- Video materials
- Guides and handbooks
- Printed course materials
- Web-based course materials
- Technical reports
- Journal articles
- CD-ROMs/DVDs
- Other (Please write in other)

16 Please rate the quality of FIPSE's service to you and other project staff (telephone discussions, e-mails, advising on technical and financial issues, evaluation, Web resources)

- Superior
- Above Average
- Average
- Below Average
- Poor

17 Please rate your satisfaction with the FIPSE Project Directors' Meeting in helping you and your staff.

() Superior
() Above Average
() Average
() Below Average
() Poor
() Was unable to attend this year
() Not applicable

18 Please comment on the helpfulness of FIPSE's service.

IV. Report Files

Performance Narrative

No files

Evaluation Report

No files

Other Documents (Optional)

No files