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| Grantee: Report: [Year] Annual Report[Grant Number] - [Year] Annual Report Cover Sheet 1. PR/Award Grant:
2. Program:Congressionally-Directed Projects
3. Institutional Name & Address:
4. Project Title:
5. US Project Director / Contact Person:

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| --- | --- | --- |
| Name: |   |  |
| Title: |  |
| Address: |  |
| Phone: |  |
| Fax: |  |
| Email: |  |

1. Performance Reporting Period:
2. Current Budget Period:
3. Authorized Representative:

|  |  |  |
| --- | --- | --- |
| Name: |   |  |
| Title: |  |
| Phone: |  |

I. Project Description

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| Project Title: |  |
| Congressional Purpose: |  |
| Abstract: |  |
| Online References: | [URL]  |
| Subject Categories: |

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| Contacts: |  |

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| **Expense** | 1. **Original Budget**

**[Start Date]****[End Date]** | **(2)Expenditures****[Start Date]****[End Date]** | **(3)Obligations& ProjectedExpenditures** | **(4)Estimated Balance** |
|  |
| 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 | $0 |
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| Project Cost Share Totals Provided by Institution (and Partners if applicable) |
|  |
| **Expense** | 1. **Original Budget**

**[Start Date]****[End Date]** | **(2)Expenditures****[Start Date]****[End Date]** | **(3)Obligations& ProjectedExpenditures** | **(4)Estimated Balance** |
|  |
| 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 | $0  |
| Section 1 - Financial Data |  |  |  |
| 1.  | Did your organization expend more than $500,000 in Federal funds during the last fiscal year?  |  |  |  |
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| (  ) Yes  | (  ) No  | (  ) N/A  |

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| 2.  | When was your most recent OMB Circular A-133 audit?  |  |  |  |
|   | Fiscal Year: |  |  |  |
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| 3.  | Were there any findings under your most recent audit?  |  |  |  |
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| (  ) Yes  | (  ) No  | (  ) N/A  |

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

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| 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?  |  |  |  |
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| (  ) Yes  | (  ) No  | (  ) N/A  |

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| 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?  |  |  |  |
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| (  ) Yes  | (  ) No  | (  ) N/A  |

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| 7.  | Does your organization have a current negotiated indirect cost rate agreement?  |  |  |  |
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| (  ) Yes  |
| (  ) No  |

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

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|   | Expiration Date: |  |  |  |
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| 8.  | Total funds expended for for-profits? (No commas)  |  |  |  |
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| Equipment: $    |

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| Consultants: $    |

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| Contractual: $    |

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

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| Section 2 - Performance Data |  |  |  |
| 1.  | Has your project director changed during this reporting period?  |  |  |  |
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| (  ) Yes  |
| (  ) No  |

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| 1b.  | If you answered "Yes," please provide the name, title, address, telephone, fax, and E-mail address of the new project director?  |  |  |  |
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| 2.  | What is the primary purpose of your Congressionally-directed grant? (Check all that apply)  |  |  |  |
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| (  ) Purchase of equipment, computers, or technology  | (  ) Scholarships  |
| (  ) Endowment  | (  ) Conferences  |
| (  ) Professional Development  | (  ) Initiate a new academic program  |
| (  ) Provide specialized training to underserved populations  | (  ) Curriculum development  |
| (  ) Support an academic program  | (  ) Provide support for research activities  |
| (  ) Enhance student services  | (  ) Provide services to learners with disabilities  |
| (  ) Provide service for veterans  | (  ) Job Training  |
| (  ) Other (Specify)  |  |

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| 3.  | If the purpose of the grant was to support new or ongoing academic programs, in which area(s) of study would it pertain? (Check all that apply)  |  |  |  |
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| (  ) Teacher education  | (  ) Science education  |
| (  ) Health care education  | (  ) Distance learning education  |
| (  ) Math education  | (  ) Humanities or arts education  |
| (  ) Civic engagement/leadership education  | (  ) Vocational or On-the-job training education  |
| (  ) Homeland security  | (  ) Unspecified curriculum development  |
| (  ) Professional education (law, business, journalism, etc.)  | (  ) Other (Specify)  |
| (  ) N/A  |  |

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| 4.  | Methods used to determine outcomes:  |  |  |  |
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| (  ) Assessments  |
| (  ) Surveys  |
| (  ) Observations  |
| (  ) Focus Groups  |
| (  ) Outcomes accounted for by deliverables (e.g., equipment purchased)  |
| (  ) Outcomes consisted of the number of awards made (e.g., scholarships awarded)  |
| (  ) Other (Specify)  |

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| 5.  | Deliverables as outcomes of the grant: (Check all that apply)  |  |  |  |
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| (  ) Project-based conferences  | (  ) Conference materials  |
| (  ) Conference presentations/speakers  | (  ) Course Modules  |
| (  ) Project-specific Web-site  | (  ) Textbooks  |
| (  ) Software programs  | (  ) Books  |
| (  ) Video Materials  | (  ) Guides and handbooks  |
| (  ) Printed course materials  | (  ) Web-based course materials  |
| (  ) Technical reports  | (  ) Journal articles  |
| (  ) CD-ROMs/DVDs  | (  ) Purchased equipment  |
| (  ) Other (Specify)  |  |

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| 6.  | List activities which addressed specific project objectives:  |  |  |  |
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| 7.  | Identify project outcomes (results of meeting objectives) that have notably impacted the Congressional purpose of your grant. Number each separately and elaborate.  |  |  |  |
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| 8.  | FIPSE administers the Congressionally-directed grants for postsecondary education by reviewing applications, distributing grant management materials, and providing technical assistance on project-specific issues. Please rate the overall quality of FIPSE's service to your project:  |  |  |  |
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| (  ) Superior  |
| (  ) Very satisfactory  |
| (  ) About average  |
| (  ) Somewhat unsatisfactory  |
| (  ) Very poor  |

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| 9.  | If you rated FIPSE's service as less than "Superior", please tell us how our service may be improved.  |  |  |  |
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|  IV. Report Files**Performance Narrative** *No files*  |  |  |  |

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