

Grantee:  
Report: [Year] Final Report  
[Grant Number] - [Year] Final

- 1. PR/Award Grant:
- 2. Program:  
    Congressionally-Directed Projects
- 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:  
Congressional  
Purpose:  
Abstract:  
Online References: [URL]  
Subject Categories:  
Contacts:

Expense	(1) Original	(2)Expenditure	(3)Estimated
	Budget	s	
	[Start Date]	[Start Date]	
	[End Date]	[End Date]	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
<b>Total</b>	\$0	\$0	\$0

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

Expense	(1) Original Budget		(2)Expenditure	(3)Estimate
	[Start Date]	[End Date]	s [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
<b>Total</b>		\$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

1. Has your project director changed during this reporting period?  
( ) Yes  
( ) No
- 1b. If you answered "Yes," please provide the name, title, address, telephone, fax, and E-mail address of the new project director?
2. What is the primary purpose of your Congressionally-directed grant? (Check all that apply)  
( ) Purchase of equipment, computers, or technology ( ) Scholarships  
( ) Endowment ( ) Conferences  
( ) Professional Development ( ) Initiate a new academic program

- |  |   |
|--|---|
| <input type="checkbox"/> Provide specialized training to underserved populations | <input type="checkbox"/> Curriculum development                         |
| <input type="checkbox"/> Support an academic program                             | <input type="checkbox"/> Provide support for research activities        |
| <input type="checkbox"/> Enhance student services                                | <input type="checkbox"/> Provide services to learners with disabilities |
| <input type="checkbox"/> Provide service for veterans                            | <input type="checkbox"/> Job Training                                   |
| <input type="checkbox"/> Other (Specify)   |   |

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)

- |   |  |
|---|--|
| <input type="checkbox"/> Teacher education  | <input type="checkbox"/> Science education                           |
| <input type="checkbox"/> Health care education                                    | <input type="checkbox"/> Distance learning education                 |
| <input type="checkbox"/> Math education   | <input type="checkbox"/> Humanities or arts education                |
| <input type="checkbox"/> Civic engagement/leadership education                    | <input type="checkbox"/> Vocational or On-the-job training education |
| <input type="checkbox"/> Homeland security  | <input type="checkbox"/> Unspecified curriculum development          |
| <input type="checkbox"/> Professional education (law, business, journalism, etc.) | <input type="checkbox"/> Other (Specify)                             |
| <input type="checkbox"/> N/A  |  |

4. Methods used to determine outcomes:

- ☐ 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)

5. Deliverables as outcomes of the grant: (Check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Project-based conferences         | <input type="checkbox"/> Conference materials       |
| <input type="checkbox"/> Conference presentations/speakers | <input type="checkbox"/> Course Modules             |
| <input type="checkbox"/> Project-specific Web-site         | <input type="checkbox"/> Textbooks                  |
| <input type="checkbox"/> Software programs                 | <input type="checkbox"/> Books                      |
| <input type="checkbox"/> Video Materials                   | <input type="checkbox"/> Guides and handbooks       |
| <input type="checkbox"/> Printed course materials          | <input type="checkbox"/> Web-based course materials |
| <input type="checkbox"/> Technical reports                 | <input type="checkbox"/> Journal articles           |
| <input type="checkbox"/> CD-ROMs/DVDs                      | <input type="checkbox"/> Purchased equipment        |
| <input type="checkbox"/> Other (Specify)                   |   |

6. List activities which addressed specific project objectives:

7. Identify project outcomes (results of meeting objectives) that have notably impacted the Congressional purpose of your grant. Number each separately and elaborate.

8. Were any new jobs created as a result of the grant award?

- ☐ Yes
- ☐ No

8a. If yes, please estimate the number of jobs:

—

9. Do you intend to apply for any competitive grant funding to continue or expand this project within the next 12 months?

- ☐ Yes

☐ No

10. 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:

☐ Superior  
☐ Very satisfactory  
☐ About average  
☐ Somewhat unsatisfactory  
☐ Very poor

11. If you rated FIPSE's service as less than "Superior", please tell us how our service may be improved.

IV. Report Files  
**Performance Narrative**  
*No files*