
Grantee:
Report: [Year]
Final Report
[Grant
Number] -
[Year] Final
Report
PR/Award
Grant:

1. Program:
[International
Program]
 2. Institutional
Name &
Address:
 3. Project
Title:
 4. US
Project
Director /
Contact
Person:

Name:
Title:
Address
:
Phone:
Fax:
Email:
 5. Performance
Reporting
Period:
 6. Current
Budget
-

Period:

7. Authorized Representative:

Name:
Title:
Phone:
:

I. Project Description
Project Title:
Abstract:
Online References:
Subject Categories:
Contacts:

Expense	(1) Original Budget	(2) Expenditures [Start Date] [End Date]	(3) Estimated Balance
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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 and 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) 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 and	\$0

Scholarships			
Total	\$0	\$0	\$0

**III.
Mobility**

Student mobility from U.S. to [Country]:

U.S. to [Country]	<i>[Country] Lead</i>	<i>[Country] Partner</i>	Total U.S. students sent
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<i>U.S. Lead</i>			0
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<i>U.S. Partner</i>			0
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Total	0	0	0
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1. Total number of U.S. students in current year _
2. Total number of U.S. students since the beginning of the project, including current year _
3. Average duration of study abroad for U.S. students _
4. Average stipend for U.S. students in US\$ _
5. Total number of U.S. students who participated in current year but did not study in [Country] _
6. Total number of U.S. students who participated since the beginning of the project, including current year, but did not study in [Country] _

Student mobility from [Country] to U.S.:

[Country] to U.S.	<i>U.S. Lead</i>	<i>U.S. Partner</i>	Total [Country] students sent
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<i>[Country] Lead</i>			0
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<i>[Country] Partner</i>			0
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Total	0	0	0
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1. Total number of [Country] students in current year _
 2. Total number of [Country] students since the beginning of the project, including current year _
 3. Average duration of study abroad for [Country] students _
 4. Average stipend for [Country]
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-
- students in US\$ _
 5. Total number of [Country] _ students who participated in current year but did not study in U.S. _
 6. Total number of [Country] students who participated since the beginning of the project, including current year, but did not study in U.S. _

Faculty Mobility:

1. Total number of U.S. faculty to [Country] in current year _
2. Total number of U.S. faculty to [Country] since the beginning of the project, including current year _
3. Total number of U.S. faculty who participated in current year but did not travel to [Country] _
4. Total number of U.S. faculty who participated since the beginning of the project, including current year, but did not travel to [Country] _
5. Total number of [Country] faculty to U.S. in current year _
6. Total number of [Country] faculty to U.S. since the beginning of the project, including current year _
7. Total number of [Country] faculty who participated in current year but did not travel to U.S. _
8. Total number of [Country] faculty who participated since the beginning of the project, including current year, but did not travel to U.S. _

IV

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? (Leave blank if you have not had one)
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
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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?
() 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 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)

- 2 Has your project received any additional funding (external or internal) since the beginning of the project?
- Yes
 - No

If you answered "No" to question 2, please go to question 4.

- 3 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)

- 4 Has your project received any press coverage since the beginning of the project?
- Yes
 - No

If you answered "No" to question 4, please go to question 6.

- 5 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

- 6 Has your project received any awards since the beginning of the grant?
- Yes
 - No

If you answered "No" to question 6, please go to question 8.

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

- 8 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)
- 9 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
- 10 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
- 11 Please comment on the helpfulness of FIPSE's service.

V. Report Files

Performance Narrative

No files

Evaluation Report

No files

Other Documents (Optional)

No files
