

Partners

- Indicate the number of partners (formal and informal) involved in implementing the program during the reporting period.

_____ Formal Partners (those partners with a written agreement, such as signed MOU, contract, or Letter of Commitment, and who cooperate and collaborate with the grantee to implement the program by sharing resources and working together to enhance each other's capacity)

_____ Informal Partners (those partners who support the implementation of the program informally through networking and coordinating activities; there is no written agreement between the grantee and an informal partner)

- Of all the project's implementation partners that were engaged at the beginning of the program year, how many were still engaged at the end of the program year?

_____ Formal Partners (those partners with a written agreement, such as signed MOU, contract, or Letter of Commitment, and who cooperate and collaborate with the grantee to implement the program by sharing resources and working together to enhance each other's capacity)

_____ Informal Partners (those partners who support the implementation of the program informally through networking and coordinating activities; there is no written agreement between the grantee and an informal partner)

- (Asked only in the final data collection) How many partners described firm plans to continue implementation of the program after the end of OAH grant funding?

The performance measures reported to the agency (and to Congress) will be obtained by summing the responses to the questions across grantee types and tiers. In addition, a measure of total partners for each question (e.g., the number of total partners grantees are working with) will be obtained and will be presented by grantee type and tier. The partners questions will also be used to assess and report on sustainability plans.

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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 0990-0XXX. The time required to complete this information collection is estimated to average 0.25 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer.