



PERKINS WEB PORTAL



Guide for Submitting the Consolidated Annual Report

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number.

The valid OMB control number for this information collection is 1830-0569. Public reporting burden for this collection of information is estimated to average 164 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefit (Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) (20 U.S. C. 2301 et seq. as amended by P.L. 109-270). If you have comments or concerns regarding the status of your individual submission of this APR, please contact (Office of Career, Technical and Adult Education; Director, Division of Academic and Technical Education; 550 12th Street, SW; Washington, D.C. 20202 directly.

[Note: Please do not return the completed report to this address.]

Consolidated Annual Report (CAR) Submission Information

KEY DATES

- **TBD**
CAR Training Session 1
- **TBD**
CAR Training Session 2
- **TBD**
CAR Reporting Begins
- **TBD**
Deadline to submit secondary performance data to the EDFACTS Submission System
- **December 31**
CAR Reporting Ends

GETTING HELP

- For general assistance, please contact Sharon Head, OCTAE, at: Sharon.Head@ed.gov.
- For technical assistance, please contact: perkins-help@rti.org.

ACCESSING THE PERKINS WEB PORTAL

Perkins Web Portal URL: <https://perkins.ed.gov/>

Important Notes:


- Account information will be sent separately.
- New users must activate their account and create a password before logging in to the Perkins Web Portal.

Table of Contents

Activate Your Account and Create a Password	4
Log in to the Perkins Web Portal	5
Navigating the Perkins Web Portal	6
Submit Your Report	7
Report Workspace	8
Consolidated Annual Report (CAR) Steps:	
Step 1. Cover Page	9-10
Step 2. Reporting Information	11
Step 3. Use of Funds	12
Step 4. Technical Skill Attainment <i>(Not required)</i>	13
Step 5a. Interim Financial Status Report	14-17
Step 5b. Final Financial Status Report	18-21
Step 6. Enrollment Data	22
Step 6a. Enrollment Data for CTE Participants	23-25
Step 6b. Enrollment Data for CTE Concentrators	26
Step 7. Performance Data	27-30
Step 8. Program Improvement Plans	31
Step 9. Review & Certification	32-35

Log in to the Perkins Web Portal

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV)



You have successfully updated your password.

Welcome to the Perkins Web Portal

Please login below. If you have questions about accessing the Perkins Web Portal, [contact us](#).

Email:

Password:


[FORGOT PASSWORD](#) [LOGIN](#)

You are accessing a U.S. Government information system, which includes (1) this computer session, (2) this computer network, (3) all computers connected to this network session. This information system is provided for U.S. Government-authorized use only. Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties. Personnel using remote access shall not download or store government information on private equipment, optical or digital media.

By using this information system, you understand and consent to the following:

- You have no reasonable expectation of privacy regarding any communications or data transiting this information system. At any time, the government may monitor, intercept, search and seize any communication or data transiting this information system.
- Any communications or data transiting this information system may be disclosed or used for any purpose.

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Instructions:

Enter your email and the password you created and click **Login**.

Note

You can reset your password by clicking **Forgot Password** on the log in page. Passwords may be changed once every 24 hours.

Navigating the Perkins Web Portal

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV)

3 Logged in as: State (Test) Director | My Account | Logout


PERKINS WEB PORTAL


2 Home | Submit Your Report | View & Download Reports | User Help Center


Welcome!

The Perkins Web Portal is your one stop for all Perkins reporting.
Choose an option below, or watch a video tutorial on how to get started.

1

 **Submit Your Report**
This section provides access to all open submission modules.

 **View & Download Reports**
Access previous report submissions, and run custom reports.

 **User Help Center**
Get help with an interactive guide and videos, or contact us.

ANNOUNCEMENTS

4

- 9/27/2016
CAR Training #1
- 9/29/2016
CAR Training #2
- 10/1/2016
CAR Reporting Begins
- 12/12/2016
Deadline to submit 2015-16 secondary performance data to the EDFACTS Submission System
- 12/31/2016
CAR Reporting Ends

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Instructions:

- 1 Access the main sections of the Perkins Web Portal from the home page:
 - **Submit Your Report**
Access the submission portals. See page 7 for more information.
 - **View & Download Reports**
See previous report submissions. Download report packages.
 - **User Help Center**
View instructions for report submissions, and watch recorded training sessions.
- 2 The main sections can also be accessed using the navigation links at the top of the page.
- 3 Click **My Account** to view and update your account information. Click **Logout** to end your session.
- 4 Key dates are displayed under **Announcements**.

Submit Your Report

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State (Test) Director | My Account | Logout

PERKINS WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Welcome!

The Perkins Web Portal is your one stop for all Perkins reporting. Choose an option below, or watch a video tutorial on how to get started.

- 1** **Submit Your Report**
This section provides access to all open submission modules.

- View & Download Reports**
Access previous report submissions, and run custom reports.
- User Help Center**
Get help with an interactive guide and videos, or contact us.

ANNOUNCEMENTS

- 9/27/2016
CAR Training #1
- 9/29/2016
CAR Training #2
- 10/1/2016
CAR Reporting Begins
- 12/12/2016
Deadline to submit 2015-16 secondary performance data to the EDFACTS Submission System
- 12/31/2016
CAR Reporting Ends

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Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State (Test) Director | My Account | Logout

PERKINS WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Submit Your Report

Your options for data submission appear below. Only open items are accessible. If you need access to a closed system, click on Request Access.

- 2** **CAR 2.0**
Consolidated Annual Report Submission
Status: Open until 12/31/2016
- 3** **State Plan**
State Plan Submission
Status: Closed
- 4** **Request Access**
If you need access to a submission system, please submit an access request.

ANNOUNCEMENTS

- 9/27/2016
CAR Training #1
- 9/29/2016
CAR Training #2
- 10/1/2016
CAR Reporting Begins
- 12/12/2016
Deadline to submit 2015-16 secondary performance data to the EDFACTS Submission System
- 12/31/2016
CAR Reporting Ends

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Instructions:

- 1** To access CAR, click **Submit Your Report** on the Perkins Web Portal homepage.
- 2** From the Submit Your Report page, click **CAR 2.0**.
- 3** You can also access CAR using the navigation provided at the top of the page.
- 4** Click **Request Access** if you think you should have access to a report that is closed or not shown on the Submit Your Report page, or if you need to request accounts for other members of your team who help complete the report.

Note

Only State Directors may submit access requests.

Report Workspace

The screenshot shows the PERKINS WEB PORTAL interface. At the top, it displays the user's name (Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV)), the login status (Logged in as: State Director | My Account | Logout), and navigation links (Home, Submit Your Report, View & Download Reports, User Help Center). The main content area is titled "REPORT WORKSPACE" and includes a "HELP ON THIS PAGE" button. A sidebar on the left lists "REQUIRED STEPS" from 1 to 9. The main workspace is divided into sections: "1. Cover Page", "1. Recipient Organization:" (with fields for Organization Name, City, Address 1, State, Address 2, and Zipcode), "2. Period covered by this report:" (with Start Date and End Date dropdowns), "3. PR/Award Numbers:" (with a field for Title I Basic Grant to States), "4. Remarks:" (with a text area), and "5. Lead individuals completing this report:" (with instructions and four dropdown menus for selecting individuals). At the bottom, there are "SAVE DRAFT" and "SAVE & CONTINUE" buttons. Numbered callouts 1-4 point to the sidebar, the help button, the form fields, and the save buttons respectively.

Instructions:


- 1 Links to the required steps are shown to the left of the Report Workspace.
- 2 Click **Help on this page** to view instructions and tips for completing each step.
- 3 Enter the requested data in the web form located in the Report Workspace.
- 4 Save your progress by clicking **Save Draft**. Click **Save & Continue** to save your work and move on to the next step.

Note

Use the links on the left-hand side of the page to return to a step to make changes. Do not use the browser's **Back** button.

CAR – Step 1. Cover Page

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State Director | My Account | Logout



Home | [Submit Your Report](#) | [View & Download Reports](#) | [User Help Center](#)

Home > Submit Your Report > CAR

REQUIRED STEPS	REPORT WORKSPACE * HELP ON THIS PAGE												
<ul style="list-style-type: none">1. Cover Page2. Reporting Information3. Use of Funds4. Technical Skill Attainment5. Financial Status Reports6. Enrollment Data7. Performance Data8. Program Improvement9. Review & Certification	<h3>1. Cover Page</h3> <p>1. Recipient Organization:</p> <table style="width: 100%;"><tr><td>Organization Name:</td><td>Placeholder Text</td><td>City:</td><td>Placeholder Text</td></tr><tr><td>Address 1:</td><td>Placeholder Text</td><td>State:</td><td>Placeholder Text</td></tr><tr><td>Address 2:</td><td>Placeholder Text</td><td>Zipcode:</td><td>Placeholder Text</td></tr></table> <hr/> <p>2. Period covered by this report:</p> <p>Start Date: <input type="text" value="XX/XX/20XX"/></p> <p>End Date: <input type="text" value="XX/XX/20XX"/></p> <hr/> <p>3. PR/Award Numbers:</p> <p>Title I Basic Grant to States: <input style="width: 100px;" type="text"/></p> <hr/>	Organization Name:	Placeholder Text	City:	Placeholder Text	Address 1:	Placeholder Text	State:	Placeholder Text	Address 2:	Placeholder Text	Zipcode:	Placeholder Text
Organization Name:	Placeholder Text	City:	Placeholder Text										
Address 1:	Placeholder Text	State:	Placeholder Text										
Address 2:	Placeholder Text	Zipcode:	Placeholder Text										

Continues on next page

Instructions:

1. Confirm the Recipient Organization contact information. If the information is incorrect contact your Regional Accountability Specialist.
2. Confirm the program year covered in the report, e.g. July 1, 2015 through June 30, 2016.
3. Enter PR/Award number as indicated in Block 5 of the Grant Award Notifications for the Basic Grant to States.

CAR – Step 1. Cover Page (Continued)

4. Remarks: (Any explanation deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation)

5. Lead individuals completing this report:

Select the lead individuals completing the report. If additional individuals without accounts will be completing the report, return to the Submit Your Report page and click "Request Access" to submit a request for additional user accounts.

1. Please select the individual responsible for the **narrative performance information** in this report:

2. Please select the individual responsible for the **financial status reports** in this report:

3. Please select the individual responsible for the **performance data** in this report:

4. Please select the **lead individual who may be contacted to answer questions** about this report:

SAVE DRAFT


SAVE & CONTINUE

Instructions:

4. Include any remarks that are necessary to explain any specifics in the report or information required by the Department of Education.
5. Select the lead individuals completing the report. If additional individuals without accounts will be completing the report, return to the **Submit Your Report** page and click **Request Access** to submit a request for additional user accounts.

CAR – Step 2. Reporting Information

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State Director | My Account | Logout



[Home](#) | [Submit Your Report](#) | [View & Download Reports](#) | [User Help Center](#)

Home > Submit Your Report > CAR

REQUIRED STEPS	REPORT WORKSPACE ★ HELP ON THIS PAGE
1. Cover Page	<h3>2. Reporting Information</h3> <p>1. Your state is required to submit Race/Ethnicity data using the 1997 Race/Ethnicity Standards.</p> <hr/> <p>2. Required Performance Data</p> <p>The following core indicators of performance must be reported in your CAR report:</p> <p>1S1, 1S2, 2S1, 3S1, 4S1, 5S1, 1P1, 2P1, 3P1, 4P1, 5P1, 5P2</p> <p>Secondary data are reported in the Eden/EDFacts system. More information is available in Step 7.</p> <hr/> <p>3. If your state has an ESSA waiver for reporting 1S1 and 1S2 data, please describe the waiver below. Upload any supporting documentation by clicking "Browse/Choose File" below.</p> <div style="border: 1px solid #ccc; height: 60px; margin: 10px 0;"></div> <p><input type="button" value="Browse..."/> No file selected.</p> <p>Uploaded file: filename.docx</p>
2. Reporting Information	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	

Instructions:

This page indicates your state's reporting requirements. If any information listed in questions 1 and 2 is incorrect, please contact your Regional Accountability Specialist.

If your state has an ESSA waiver for reporting 1S1 and 1S2 data, please describe the waiver in the text box provided. Upload any supporting documentation by clicking *Browse/Choose File*.

CAR – Step 3. Use of Funds

PERKINS WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Home > Submit Your Report > CAR VERMONT 2015-2016

REQUIRED STEPS	REPORT WORKSPACE ★ HELP ON THIS PAGE
1. Cover Page	3. Use of Funds: Part A 1. During the reporting year, did your state use <i>Perkins</i> funds to develop valid and reliable assessments of technical skills? <input checked="" type="radio"/> Yes <input type="radio"/> No <div style="border: 1px solid #ccc; padding: 5px;"><p>Rich text editor toolbar: B I U S Ix</p><p>Characters: 0 (Limit: 251488)</p></div> 2. During the reporting year, did your state use <i>Perkins</i> funds to develop or enhance data systems to collect and analyze data on secondary and postsecondary academic and employment outcomes? <input type="radio"/> Yes <input type="radio"/> No 3. Supporting Documentation Upload supporting documentation and provide a description for each file. <input type="button" value="Choose File"/> No file chosen <input type="text"/>
2. Reporting Information	
3. Use of Funds Part A Part B Part C	
4. Technical Skill Attainment	
5. Financial Status Reports	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	

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Instructions:

Section 124(b) of Perkins IV describes the required and permissive uses of State leadership funds.

- Provide a summary of your State's major initiatives and activities for each of the required use of funds questions. Click "Save Draft" at the bottom of the screen to save your work in progress.
- For permissive use of funds questions, choose Yes or No. If you choose Yes, enter your answer in the textbox provided.
- Upload supporting documentation in the space provided and provide a description for each file. Supporting documentation is optional.

CAR – Step 4. Technical Skill Attainment

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State Director | [My Account](#) | [Logout](#)


 **PERKINS**
WEB PORTAL

[Home](#) | [Submit Your Report](#) | [View & Download Reports](#) | [User Help Center](#)

Home > [Submit Your Report](#) > CAR

REQUIRED STEPS	REPORT WORKSPACE	★ HELP ON THIS PAGE
1. Cover Page	<h3>4. Technical Skill Attainment</h3> <div style="border: 1px solid #ccc; padding: 5px; margin: 10px 0;">This step is not required.</div>	
2. Reporting Information		
3. Use of Funds		
4. Technical Skill Attainment		
5. Financial Status Reports		
6. Enrollment Data		
7. Performance Data		
8. Program Improvement		
9. Review & Certification		

[CONTINUE](#)

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Instructions:

This step is not required. Click *Continue* to proceed to the next step.

CAR – Step 5a. Interim Financial Status Report

Carl D. Perkins Career and Technical Education Act of 2006 (Perkins IV) Logged in as: State Director | My Account | Logout

PERKINS WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Home > Submit Your Report > CAR

REQUIRED STEPS	REPORT WORKSPACE
1. Cover Page	<p style="text-align: right;">★ HELP ON THIS PAGE</p> <p>Interim Financial Status Report</p> <p><i>Directions: Complete the Interim Financial Status Report below. Report must be certified by the State's Financial Auditor.</i></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>1. State Name: <input type="text"/></p> <p>2. Federal Funding Period: Start Date: <input type="text"/> End Date: <input type="text"/></p> <p>3. Reporting Period: Start Date: <input type="text"/> End Date: <input type="text"/></p> <p>4. Accounting Basis: <input checked="" type="radio"/> Cash <input type="radio"/> Accrual</p> </div> <div style="width: 48%;"> <p>5. Grant Award Number: State Basic Grant (Title I): <input type="text"/></p> <p>6. Grant Award Amount: State Basic Grant (Title I): <input type="text"/></p> <p><i>Note: Question 7 below is optional. It needs to be completed only if the state is amending/revising its financial status report after a final submission.</i></p> <p>7. Amended Interim FSR: <input type="checkbox"/> Yes Date of Amended FSR: <input type="text"/></p> </div> </div>
2. Reporting Information	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports a. Interim Report b. Final Report	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	

Row	1	2	3	4	5	6	7	8	9	10	11
	Net Outlays Previously Reported	Total Outlays This Report Period	Program Income Credits	New Outlays This Report Period (Column 2 - 3)	Net Outlays To Date (Column 1 + 4)	Non-Federal Share of Outlays	Total Federal Share of Outlays (Column 5 - 6)	Federal Share of Unliquidated Obligations	Federal Share of Outlays & Unliquidated Obligations (Column 7 + 8)	Federal Funds Authorized	Balance of Unobligated Federal Funds (Column 10 - 9)
A	*TOTAL TITLE I FUNDS*										
B	LOCAL USES OF FUNDS										
C	RESERVE										
D	Funds for Secondary Recipients	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
E	Funds for Postsecondary Recipients	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
F	Total (Row D + E)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Continues on next page

Instructions:

The FSR form must be completed and certified by the State's Financial Auditor.

1. Confirm the name of the State submitting the interim FSR. If the information is incorrect, contact your Regional Accountability Specialist.
2. Enter the start and end dates of the 15-month federal funding period for the Title I award.
3. Enter the start and end dates of the reporting period covered by the interim FSR. The dates for the interim FSR report may span up to a 15-month period.
4. Select the accounting method used by the State to track program expenditures: Cash or Accrual.
5. Enter the grant award number for the Title I grant.
6. Enter the amount of the State's Title I grant award as indicated on the grant award notification (GAN).
7. Check the box if the State is filing an amended interim FSR and enter the date in the adjacent box.

CAR – Step 5a. Interim Financial Status Report (Continued)

See pages 16-17 for instructions on completing the interim FSR matrix.

G FORMULA DISTRIBUTION											
H	Funds for Secondary Recipients	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I	Funds for Postsecondary Recipients	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	Total (Row H + I)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K	TOTAL LOCAL USES OF FUNDS (Row F + J)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
L STATE LEADERSHIP											
M	Non-traditional Training and Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
N	State Institutions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
O	Other Leadership Activities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
P	TOTAL STATE LEADERSHIP (Row M + N + O)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q STATE ADMINISTRATION											
R	Total State Administration	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
S	TOTAL TITLE I FUNDS (Row K + P + R)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional Information:											
<div style="border: 1px solid gray; padding: 5px;"> RBC B I S I_x </div> <div style="border: 1px solid gray; height: 150px; margin-top: 5px;"></div>											
body p											

CLEAR FORM
SAVE DRAFT
SAVE & CONTINUE

CAR – Step 5a. Interim Financial Status Report (Continued)

Instructions for completing the interim FSR matrix:

Rows

Below are row headings that appear on the interim FSR matrix, listed in the order they appear from top to bottom on the interim FSR. Unless otherwise specified, a State must provide information for each row category in each of the interim FSR columns.

- A. *Total Title I Funds*— No information needs to be entered for this row. The total amount of the grant award made to the eligible agency under Sec. 111 of Title I of Perkins IV for the funding period covered by the interim FSR.
- B. *Local Uses of Funds*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency distributes to eligible recipients. This amount shall not be less than 85 percent of the total Title I allocation.
- C. *Reserve*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency makes available as a reserve for eligible recipients under Sec. 112(c) of Perkins IV. This amount shall not be more than ten percent of the funds made available for distribution to eligible recipients.
- D. *Funds for Secondary Recipients*— Enter the amounts of reserve funds made available to secondary recipients. Do not enter information in Columns 4, 5, 7, 9, or 11.
- E. *Funds for Postsecondary Recipients*— Enter the amounts of reserve funds made available to postsecondary recipients. Do not enter information in Columns 4, 5, 7, 9, or 11.
- F. *Total*— Do not enter information in row F. The total amount of reserve funds made available to secondary and postsecondary recipients will be automatically calculated for each column by adding rows D and E.
- G. *Formula Distribution*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency distributes by formula under Sec. 131 and 132 of Perkins IV to eligible secondary and postsecondary recipients, respectively, after subtracting any funds to be distributed under a reserve.
- H. *Funds for Secondary Recipients*— Enter the amounts of funds distributed by formula to secondary recipients. Do not enter information in Columns 4, 5, 7, 9, and 11.
- I. *Funds for Postsecondary Recipients*— Enter the amounts of funds distributed by formula to postsecondary recipients. Do not enter information in Columns 4, 5, 7, 9, and 11.
- J. *Total*— Do not enter information in row J. The total amount of funds distributed by formula to eligible recipients will be automatically calculated for each column by adding rows H and I.
- K. *Total Local Uses of Funds*— Do not enter information in row K. The total amount of Title I funds that the eligible agency distributes under the reserve and by formula to eligible recipients will be automatically calculated for each column by adding rows F and J.
- L. *State Leadership*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency uses to carry out the State leadership activities described in Sec. 124 of Perkins IV. This amount shall not be more than ten percent of the eligible agency's total Title I funds.
- M. *Nontraditional Training and Employment*— Enter the amounts of State leadership funds made available for services that prepare individuals for non-traditional fields. This amount shall not be less than \$60,000 and not be more than \$150,000. Do not enter information in Columns 4, 5, 7, 9, and 11.
- N. *State Institutions*— Enter the amounts of State leadership funds made available to serve individuals in State institutions, such as State correctional institutions and institutions that serve individuals with disabilities. This amount shall not be more than one percent of the eligible agency's total Title I funds. Do not enter information in Columns 4, 5, 7, 9, and 11.
- O. *Other Leadership Activities*— Enter the amounts of other State leadership funds made available. Do not enter information in Columns 4, 5, 7, 9, and 11.
- P. *Total State Leadership*— Do not enter information in row P. The total amount of Title I funds for State leadership activities will be automatically calculated for each column by adding rows M, N, and O.
- Q. *State Administration*— No information needs to be entered for this row. The total amount of Title I funds that the eligible agency uses to carry out the State administration activities described in Sec. 121 of Perkins IV. This amount shall not be more than five percent, or \$250,000, whichever is greater of the eligible agency's total Title I funds.
- R. *Total State Administration*— Enter the amounts of Title I funds for State administration activities. Do not enter information in Columns 4, 5, 7, 9, and 11.
- S. *Total Title I Funds*— Do not enter information in row S. The total amount of funds that the eligible agency uses to carry out activities under Title I of Perkins IV will be automatically calculated for each column by adding rows K, P, and R. This amount includes funds for local uses, State leadership, and State administration.

CAR – Step 5a. Interim Financial Status Report (Continued)

Instructions for completing the interim FSR matrix:

Columns

Below are column headings on the interim FSR matrix, listed in the order they appear from left to right on the interim FSR. The column headings on the interim FSR matrix are used to track expenditures for each of the rows.

1. *Net Outlays Previously Reported*— Do not enter information in column 1 for the interim FSR.
2. *Total Outlays This Report Period*— Report first-year expenditures for the interim report. Include any program income and non-Federal outlays made during the reporting period.
3. *Program Income Credits*— Report program income. Refer to Uniform Guidance at 2 CFR 200.307 for more information and details. This column will be blank in most instances.
4. *Net Outlays This Report Period*— Do not enter information in column 4. The net outlays will be automatically calculated by subtracting program income credits from total outlays (column 2 - column 3).
5. *Net Outlays To Date*— Do not enter information in column 5. For the interim report, column 5 will be automatically populated with the amounts from column 4.
6. *Non-Federal Share of Outlays*— Enter non-Federal outlays, including State expenditures to meet the matching and hold-harmless requirements of sections 112(b) and 323(a) of Perkins IV.
7. *Total Federal Share of Outlays*— Do not enter information in column 7. The total amount of Federal outlays will be automatically calculated by subtracting non-Federal outlays from net outlays to date (column 5 - column 6).
8. *Federal Share of Unliquidated Obligations*— Enter the amounts of the Federal share of unliquidated obligations.
9. *Federal Share of Outlays and Unliquidated Obligations*— Do not enter information in column 9. The total amount Federal outlays made and the Federal share of unliquidated obligations outstanding will be automatically calculated by adding column 7 and column 8.
10. *Federal Funds Authorized*— Enter the amounts of available resources from the total Title I grant funds earmarked for the specific purposes on each row.
11. *Balance of Federal Funds*— Do not enter information in column 11. The total amounts of unobligated funds available for the carry-over year for the interim report will be automatically calculated by subtracting column 9 from column 10.

CAR – Step 5b. Final Financial Status Report

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REQUIRED STEPS	REPORT WORKSPACE: ★ Helpful Tips
1. Cover Page	<p>5b. Final Financial Status Report</p> <p><i>Directions: Complete the Interim Financial Status Report below. Report must be certified by the State's Financial Auditor.</i></p> <div style="border: 1px solid #ccc; padding: 5px;"> <p>1. State Name: <input type="text"/></p> <p>2. Federal Funding Period: Start Date: <input type="text"/> End Date: <input type="text"/></p> <p>3. Reporting Period: Start Date: <input type="text"/> End Date: <input type="text"/></p> <p>4. Accounting Basis: <input type="radio"/> Cash <input type="radio"/> Accrual</p> <p>5. Grant Award Number: State Basic Grant (Title I): <input type="text"/></p> <p>6. Grant Award Amount: State Basic Grant (Title I): <input type="text"/></p> <p><i>Note: Question 7 below is optional. It needs to be completed only if the state is amending/ revising its financial status report after a final submission.</i></p> <p>7. Amended Final FSR: <input type="checkbox"/> Yes Date of Amended FSR: <input type="text"/></p> </div>
2. Reporting Information	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports a. Interim Report b. Final Report	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	

Row	1	2	3	4	5	6	7	8	9	10	11
	Net Outlays Previously Reported	Total Outlays This Report Period	Program Income Credits	New Outlays This Report Period (Column 2 - 3)	Net Outlays To Date (Column 1 + 4)	Non-Federal Share of Outlays	Total Federal Share of Outlays (Column 5 - 6)	Federal Share of Unliquidated Obligations	Federal Share of Outlays & Unliquidated Obligations (Column 7 + 8)	Federal Funds Authorized	Balance of Unobligated Federal Funds (Column 10 - 9)
A	*TOTAL TITLE I FUNDS*										
B	LOCAL USES OF FUNDS										
C	RESERVE										
D	Funds for Secondary Recipients	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
E	Funds for Postsecondary Recipients	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
F	Total (Row D + E)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Continues on next page

Instructions:

The FSR form must be completed and certified by the State's Financial Auditor.

1. Confirm the name of the State submitting the final FSR. If the information is incorrect, contact your Regional Accountability Specialist.
2. Enter the start and end dates of the 15-month federal funding period for the Title I award.
3. Enter the start and end dates of the reporting period covered by the final FSR. The dates for the final FSR report may span up to a 27-month period.
4. Select the accounting method used by the State to track program expenditures: Cash or Accrual.
5. Enter the grant award number for the Title I grant.
6. Enter the amount of the State's Title I grant award as indicated on the grant award notification (GAN).
7. Check the box if the State is filing an amended final FSR and enter the date in the adjacent box.

CAR – Step 5b. Final Financial Status Report (Continued)

See pages 20-21 for instructions on completing the final FSR matrix.

G FORMULA DISTRIBUTION												
H	Funds for Secondary Recipients	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I	Funds for Postsecondary Recipients	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	Total (Row H + I)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K	TOTAL LOCAL USES OF FUNDS (Row F + J)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
L STATE LEADERSHIP												
M	Non-traditional Training and Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
N	State Institutions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
O	Other Leadership Activities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
P	TOTAL STATE LEADERSHIP (Row M + N + O)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q STATE ADMINISTRATION												
R	Total State Administration	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
S	TOTAL TITLE I FUNDS (Row K + P + R)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Information:

body p

CAR – Step 5b. Final Financial Status Report (Continued)

Instructions for completing the final FSR matrix:

Rows

Below are row headings that appear on the final FSR matrix, listed in the order they appear from top to bottom on the final FSR. Unless otherwise specified, a State must provide information for each row category in each of the final FSR columns.

- A. *Total Title I Funds*— No information needs to be entered for this row. The total amount of the grant award made to the eligible agency under Sec. 111 of Title I of Perkins IV for the funding period covered by the interim FSR.
- B. *Local Uses of Funds*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency distributes to eligible recipients. This amount shall not be less than 85 percent of the total Title I allocation.
- C. *Reserve*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency makes available as a reserve for eligible recipients under Sec. 112(c) of Perkins IV. This amount shall not be more than ten percent of the funds made available for distribution to eligible recipients.
- D. *Funds for Secondary Recipients*— Enter the amounts of reserve funds made available to secondary recipients. Do not enter information in Columns 4, 5, 7, 9, or 11.
- E. *Funds for Postsecondary Recipients*— Enter the amounts of reserve funds made available to postsecondary recipients. Do not enter information in Columns 4, 5, 7, 9, or 11.
- F. *Total*— Do not enter information in row F. The total amount of reserve funds made available to secondary and postsecondary recipients will be automatically calculated for each column by adding rows D and E.
- G. *Formula Distribution*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency distributes by formula under Sec. 131 and 132 of Perkins IV to eligible secondary and postsecondary recipients, respectively, after subtracting any funds to be distributed under a reserve.
- H. *Funds for Secondary Recipients*— Enter the amounts of funds distributed by formula to secondary recipients. Do not enter information in Columns 4, 5, 7, 9, and 11.
- I. *Funds for Postsecondary Recipients*— Enter the amounts of funds distributed by formula to postsecondary recipients. Do not enter information in Columns 4, 5, 7, 9, and 11.
- J. *Total*— Do not enter information in row J. The total amount of funds distributed by formula to eligible recipients will be automatically calculated for each column by adding rows H and I.
- K. *Total Local Uses of Funds*— Do not enter information in row K. The total amount of Title I funds that the eligible agency distributes under the reserve and by formula to eligible recipients will be automatically calculated for each column by adding rows F and J.
- L. *State Leadership*— No information needs to be entered for this row. The total amount of funds under Title I of Perkins IV that the eligible agency uses to carry out the State leadership activities described in Sec. 124 of Perkins IV. This amount shall not be more than ten percent of the eligible agency's total Title I funds.
- M. *Nontraditional Training and Employment*— Enter the amounts of State leadership funds made available for services that prepare individuals for non-traditional fields. This amount shall not be less than \$60,000 and not be more than \$150,000. Do not enter information in Columns 4, 5, 7, 9, and 11.
- N. *State Institutions*— Enter the amounts of State leadership funds made available to serve individuals in State institutions, such as State correctional institutions and institutions that serve individuals with disabilities. This amount shall not be more than one percent of the eligible agency's total Title I funds. Do not enter information in Columns 4, 5, 7, 9, and 11.
- O. *Other Leadership Activities*— Enter the amounts of other State leadership funds made available. Do not enter information in Columns 4, 5, 7, 9, and 11.
- P. *Total State Leadership*— Do not enter information in row P. The total amount of Title I funds for State leadership activities will be automatically calculated for each column by adding rows M, N, and O.
- Q. *State Administration*— No information needs to be entered for this row. The total amount of Title I funds that the eligible agency uses to carry out the State administration activities described in Sec. 121 of Perkins IV. This amount shall not be more than five percent, or \$250,000, whichever is greater of the eligible agency's total Title I funds.
- R. *Total State Administration*— Enter the amounts of Title I funds for State administration activities. Do not enter information in Columns 4, 5, 7, 9, and 11.
- S. *Total Title I Funds*— Do not enter information in row S. The total amount of funds that the eligible agency uses to carry out activities under Title I of Perkins IV will be automatically calculated for each column by adding rows K, P, and R. This amount includes funds for local uses, State leadership, and State administration.

CAR – Step 5b. Final Financial Status Report (Continued)

Instructions for completing the final FSR matrix:

Columns

Below are column headings on the final FSR matrix, listed in the order they appear from left to right on the final FSR. The column headings on the final FSR matrix are used to track expenditures for each of the rows.

1. *Net Outlays Previously Reported*— Enter expenditures from column 5 (Net Outlays To Date) from the interim financial report for this grant.
2. *Total Outlays This Report Period*— Report carry-over expenditures for the final report. Include any program income and non-Federal outlays made during the reporting period.
3. *Program Income Credits*— Report program income. Refer to Uniform Guidance at 2 CFR 200.307 for more information and details. This column will be blank in most instances.
4. *Net Outlays This Report Period*— Do not enter information in column 4. The net outlays will be automatically calculated by subtracting program income credits from total outlays (column 2 - column 3).
5. *Net Outlays To Date*— Do not enter information in column 5. For the final report, column 5 will be automatically populated with the amounts from column 4.
6. *Non-Federal Share of Outlays*— Enter non-Federal outlays, including State expenditures to meet the matching and hold-harmless requirements of sections 112(b) and 323(a) of Perkins IV.
7. *Total Federal Share of Outlays*— Do not enter information in column 7. The total amount of Federal outlays will be automatically calculated by subtracting non-Federal outlays from net outlays to date (column 5 - column 6).
8. *Federal Share of Unliquidated Obligations*— Enter the amounts of the Federal share of unliquidated obligations.
9. *Federal Share of Outlays and Unliquidated Obligations*— Do not enter information in column 9. The total amount Federal outlays made and the Federal share of unliquidated obligations outstanding will be automatically calculated by adding column 7 and column 8.
10. *Federal Funds Authorized*— Enter the amounts of available resources from the total Title I grant funds earmarked for the specific purposes on each row.
11. *Balance of Federal Funds*— Do not enter information in column 11. The total amounts of unobligated funds will be automatically calculated by subtracting column 9 from column 10. These are lapsed funds that the State will be returning to the Federal Treasury.

CAR – Step 6. Enrollment Data

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REQUIRED STEPS	REPORT WORKSPACE
1. Cover Page	6. Enrollment Data This section requires that you submit your enrollment data. The Perkins Web Portal provides two options for submitting this data. You may either advance to the following pages to enter the data in the web forms, or you may download the template from the link below, populate it with your state's data, and return to this page to upload the form. Once uploaded, you must review your data in the web forms. Click the User Guide link above to read more about Enrollment Data. Download Template Upload template with your data: <input type="button" value="Browse..."/> No file selected. <input type="button" value="CONTINUE"/>
2. Reporting Information	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	

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Continues on next page

Instructions:

States must provide enrollment data for students who are considered CTE Participants and those who are considered CTE Concentrators. Enrollment data are collected for secondary, postsecondary, and adult students.

The Perkins Web Portal provides two options for submitting this data:

- 1 You may either advance to the following pages to enter the data in the web forms; or
- 2 You may download the template from the link provide, populate it with your state's data, and return to this page to upload the form. Once uploaded, you must review your data in the web forms.

CAR – Step 6a. Enrollment Data for CTE Participants

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REQUIRED STEPS	REPORT WORKSPACE	★ HELP ON THIS PAGE		
1. Cover Page	6a. Enrollment Data for CTE Participants			
2. Reporting Information		A	B	C
3. Use of Funds	Line	Population	Number of Secondary Students	Number of Postsecondary Students
4. Technical Skill Attainment	1	Grand Total	0	0
5. Financial Status Reports	2	GENDER		
6. Enrollment Data a. Participants b. Concentrators	3	Male	0	0
	4	Female	0	0
7. Performance Data	5	RACE/ETHNICITY* (1997 REVISED STANDARDS)		
8. Program Improvement	6	American Indian or Alaska Native	0	0
9. Review & Certification	7	Asian	0	0
	8	Black or African American	0	0
	9	Hispanic/Latino	0	0
	10	Native Hawaiian or Other Pacific Islander	0	0
	11	White	0	0
	12	Two or More Races	0	0
	13	Unknown (Postsecondary Only)	0	0
	14	SPECIAL POPULATION AND OTHER STUDENT CATEGORIES		
	15	Individuals With Disabilities (ADA)	0	0
16	Disability Status (ESEA/IDEA) (Secondary Only)	0	0	
17	Economically Disadvantaged	0	0	
18	Single Parents	0	0	
19	Displaced Homemakers	0	0	
20	Limited English Proficient	0	0	
21	Migrant Status	0	0	
22	Nontraditional Enrollees	0	0	

Secondary Definition for CTE Participants:

B I U S T

body p

Instructions:

Each cell on the student enrollment form must contain only one of the following four options: a whole number, "0" (zero), negative one "-1" (data not provided), or negative nine "-9" (program not offered).

0 indicates that there are no students in the cell.

-1 means that the State attempted, but was unable, to obtain data from its eligible recipients. "-1" will be counted as a "0" in aggregated totals. All cells with "-1" must be explained in the Additional Information block at the bottom of the form.

-9 means the State does not offer the program.

See pages 24-25 for instructions on completing this form.

CAR – Step 6a. Enrollment Data for CTE Participants (Continued)

Instructions for completing this form:

1. *Grand Total*— Do not enter information in row 1. The grand total for each category of students will be automatically calculated by adding row 3 and row 4.
2. *Gender*— No information needs to be entered for this row. The gender count of participants enrolled in one or more State CTE approved courses.
3. *Male*— Enter unduplicated counts of male students enrolled in one or more State CTE approved courses for columns A-E.
4. *Female*— Enter unduplicated counts of female students enrolled in one or more State CTE approved courses for columns A-E.
5. *Race/ethnicity (1997 Revised Standards)*— No information needs to be entered for this row. The ethnicity count of the students enrolled in one or more State CTE approved course. States must use the 1997 standards for race and ethnicity.

Rows 6-13: Enter ethnicity counts for students enrolled in one or more State CTE approved courses for columns A-E. May contain a duplicated student enrollment count.

6. *American Indian or Alaskan Native*— A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
7. *Asian*— A person having origins in any of the original peoples of the Far East, East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
8. *Black or African American*— A person having origins in any of the Black racial groups of Africa.
9. *Hispanic/Latino*— A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin.
10. *Native Hawaiian or Other Pacific Islander*— A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
11. *White*— A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
12. *Two or More Races*— A person belonging to two or more racial groups.
13. *Unknown (Postsecondary only)*— A postsecondary student who does not self-identify a race and/or ethnicity on a local information collection.
14. *Special Population and Other Student Categories*— No information needs to be entered for this row. The special population count of the students enrolled in one or more State CTE approved courses. Unless otherwise noted, the following categories and definitions are described in section 3 of Perkins IV.
Rows 15–23: Enter special population counts for students enrolled in one or more State CTE approved courses. These rows may contain a duplicated student enrollment count; for example, a student may be both "limited English proficient" and "economically disadvantaged."

CAR – Step 6a. Enrollment Data for CTE Participants (Continued)

15. *Individual With Disabilities (ADA) (Postsecondary and adult only)*— Individuals with any disability as defined in section 3 of the Americans with Disabilities Act of 1990 (ADA). Under section 3(2) of the ADA, the term "disability" means, with respect to an individual
 1. a physical or mental impairment that substantially limits one or more of the major life activities of such individual;
 2. a record of such an impairment; or
 3. being regarded as having such impairment. (as described in paragraph ((3))
16. *Disability Status (ESEA/IDEA) (Secondary only)* – The term "disability status" as used in section 1111(h)(1)(C)(i) of ESEA refers to a "child with a disability," which under section 9101 of ESEA has the same meaning as the term in section 1401 of the Individuals With Disabilities Education Act. Under section 1401(3) of the IDEA, the term "child with disability" means a child
 1. with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (referred to in this chapter as "emotional disturbance"), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and

2. who, by reason thereof, needs special education and related services.
17. *Economically Disadvantaged*— Individuals from economically disadvantaged families, including foster children.
18. *Single Parents*— The term "single parents" includes single pregnant women.
19. *Displaced Homemakers*— Individuals who
 1. have worked primarily without remuneration to care for a home and family and for that reason has diminished marketable skills; (ii) have been dependent on the income of another family member but is no longer supported by that income; or (iii) are a parent whose youngest dependent child will become ineligible to receive assistance under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.) not later than 2 years after the date on which the parent applies for assistance under this title; and
 2. are unemployed or underemployed and are experiencing difficulty in obtaining or upgrading employment.
20. *Limited English Proficient*— Secondary school students, adults, or out-of-school youth who have limited ability in speaking, reading, writing, or understanding the English language, and
 1. whose native language is a language other than English; or
 2. who live in a family or community environment in which a language other than English is the dominant language.
21. *Migrant Status*— The term "migrant status" as used in section 1111(h)(1)(C)(i) of the ESEA is not defined; however, the Department strongly encourages a State to use the same definition of "migrant status" as a State uses in its annual State report card and as approved in its Consolidated State Accountability Workbook.
22. *Nontraditional Enrollees*— Occupations or fields of work, including careers in computer science, technology, and other current and emerging high skill occupations, for which individuals from one gender comprise less than 25 percent of the individuals employed in each such occupation or field of work.

CAR – Step 6b. Enrollment Data for CTE Concentrators

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Home > Submit Your Report > CAR

REQUIRED STEPS		REPORT WORKSPACE * HELP ON THIS PAGE										
1. Cover Page	6b. Enrollment Data for CTE Concentrators											
2. Reporting Information		SECONDARY			POSTSECONDARY			ADULT			GRAND TOTAL	
3. Use of Funds	Line	Concentrator	Male	Female	Total	Male	Female	Total	Male	Female	Total	
4. Technical Skill Attainment	1	Agriculture, Food & Natural Resources	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
5. Financial Status Reports	2	Architecture & Construction	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
6. Enrollment Data	3	Arts, A/V Technology & Communication	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
7. Performance Data	4	Business, Marketing & Administration	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
8. Program Improvement	5	Education & Training	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
9. Review & Certification	6	Finance	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	7	Government & Public Administration	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	8	Health Science	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	9	Hospitality & Tourism	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	10	Human Services	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	11	Information Technology	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
	12	Law, Public Safety & Security	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Instructions:

Each cell on the student enrollment form must contain only one of the following four options: a whole number, "0" (zero), negative one "-1" (data not provided), or negative nine "-9" (program not offered).

0 indicates that there are no students in the cell.

-1 means that the State attempted, but was unable, to obtain data from its eligible recipients. "-1" will be counted as a "0" in aggregated totals. All cells with "-1" must be explained in the Additional Information block at the bottom of the form.

-9 means the State does not offer the program.

Instructions for completing this form:

States must provide an unduplicated count of CTE concentrators using the 16 career cluster categories recognized by OVAE and the National Association for State Directors for Career and Technical Education Consortium (NASDCTEc).

The most updated definitions of these areas and the Classification of Instructional Programs (CIP) codes crosswalk can be found on the Perkins Collaborative Resource Network (PCRN) web site at <http://cte.ed.gov/accountability/perkins-iv-crosswalks>.

If a program area or sequence of courses recognized by the State is broader than one of the 16 career cluster areas or cuts across more than one career cluster area, then the State must select the most appropriate cluster in which to place the student. If the State does not offer programs in one or more of

14	Marketing Sales & Services	0	0	0	0	0	0	0	0	0	0
15	Science, Technology, Engineering & Math	0	0	0	0	0	0	0	0	0	0
16	Transportation, Distribution, & Logistics	0	0	0	0	0	0	0	0	0	0
17	Total	0	0	0	0	0	0	0	0	0	0

Secondary Definition for CTE Concentrators:

B I U S Ix

body p

Postsecondary Definition for CTE Concentrators:

B I U S Ix

CAR – Step 7. Performance Data

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Home | Submit Your Report | View & Download Reports | User Help Center

Home > Submit Your Report > CAR

REQUIRED STEPS	REPORT WORKSPACE
1. Cover Page	7. Performance Data Step 7 requires you to input your state's performance data. The lefthand navigation includes a listing of all required indicators. Once you have filled out and saved for approval each required indicator, return to this page to request an import of your secondary data from the EDEN/EDFacts systems. You may either enter your data manually on each following page, or download the template below, populate it with your data, and upload it below. Download Template Upload template with your data: <input type="button" value="Choose File"/> No file chosen <input type="button" value="CONTINUE"/>
2. Reporting Information	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports	
6. Enrollment Data	
7. Performance Data	
a. Secondary	
b. Postsecondary	
8. Program Improvement	
9. Review & Certification	

Instructions:

States must provide performance data for the preceding program year. The required indicators are displayed in the Step 7 navigation under the applicable level (i.e. Postsecondary, Adult).

The Perkins Web Portal provides two options for submitting this data:

1 You may either advance to the following pages to enter the data in the web forms; or

2 You may download the template from the link provide, populate it with your state's data, and return to this page to upload the form. Once uploaded, you must review your data in the web forms.

Once you have filled out and saved for approval each required indicator, return to this page to request an import of your secondary data from the EDEN/EDFacts system.

Continues on next page

CAR – Step 7. Performance Data (Continued)

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PERKINS
WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Home > Submit Your Report > CAR

REQUIRED STEPS | **REPORT WORKSPACE** | * HELP ON THIS PAGE

1. Cover Page | 2. Reporting Information | 3. Use of Funds | 4. Technical Skill Attainment | 5. Financial Status Reports | 6. Enrollment Data | 7. Performance Data | 8. Program Improvement | 9. Review & Certification

7b. Postsecondary Performance Data - 1P1: Technical Skill Attainment

Line	Population	A Number of Students in the Numerator	B Number of Students in the Denominator	C State Target Level of Performance	D Actual Level of Performance	E Difference Between State Actual & Target in Percentage	F Met 90% of Adjusted Level of Performance (E,Y,N)
1	Grand Total	2247	3673	88.83%	61.18%	-27.65	X N
2	GENDER						
3	Male	90	1382		6.51%		
4	Female	2157	2291		94.15%		
5	RACE/ETHNICITY* (1997 Revised Standards)						
6	American Indian or Alaskan Native	6	6		100.00%		
7	Asian	92	101		91.09%		
8	Black or African American	356	411		86.62%		
9	Hispanic/Latino	462	508		90.94%		
10	Native Hawaiian or Other Pacific Islander	4	4		100.00%		
11	White	1900	2013		94.39%		
12	Two or More Races Islander	34	36		94.44%		
11	White	1900	2013		94.39%		
12	Two or More Races	34	36		94.44%		
13	Unknown	553	594		93.10%		
14	SPECIAL POPULATION AND OTHER STUDENT CATEGORIES						
15	Individuals With Disabilities (ADA)	62	74		83.78%		
16	Economically Disadvantaged	488	527		92.60%		
17	Single Parents	158	169		93.49%		
18	Displaced Homemakers	56	60		93.33%		
19	Limited English Proficient	87	99		87.88%		
20	Nontraditional Enrollees	865	963		89.82%		

Additional Information:

B I U S T

CLEAR FORM
SAVE DRAFT
SAVE & CONTINUE

Instructions:

Each cell on the student enrollment form must contain only one of the following four options: a whole number, "0" (zero), negative one "-1" (data not provided), or negative nine "-9" (program not offered).

0 indicates that there are no students in the cell.

-1 means that the State attempted, but was unable, to obtain data from its eligible recipients. "-1" will be counted as a "0" in aggregated totals. All cells with "-1" must be explained in the Additional Information block at the bottom of the form.

-9 means the State does not offer the program.

See pages 29-30 for instructions on completing this form.

CAR – Step 7. Performance Data (Continued)

Instructions for completing this form:

Columns

1. *Number of Students in the Numerator*— Enter the total number of secondary career and technical education concentrators meeting the State's numerator definition for each population row.
2. *Number of Students in the Denominator*— Enter the total number of secondary career and technical education concentrators meeting the State's denominator definition for each population row.
3. *State Adjusted Level of Performance*— Do not enter data in column C. The State adjusted levels of performance will be automatically populated in the matrix.
4. *Actual Level of Performance*— Do not enter data in column D. The actual levels of performance will be automatically calculated.
5. *Adjusted Versus Actual Level of Performance*— Do not enter data in column E. The actual levels of performance will be automatically calculated by subtracting column D from column E.
6. *Met 90 Percent of Adjusted Level of Performance*— Do not enter data in column F. The column will automatically calculate and display a "Y" if at least 90 percent of the adjusted level of performance was met and an "N" if it was not met.

Rows

1. *Grand Total*— Do not enter information in third row. The grand total for each category of students will be automatically calculated.
2. *Gender*— No information needs to be entered for this row. The gender count of participants enrolled in one or more State CTE approved courses.
3. *Male*— Enter unduplicated counts of male students enrolled in one or more State CTE approved courses for columns A–E.
4. *Female*— Enter unduplicated counts of female students enrolled in one or more State CTE approved courses for columns A–E.
5. *Race/ethnicity (1997 Revised Standards)*— No information needs to be entered for this row. The ethnicity count of the students enrolled in one or more State CTE approved course. States must use the 1997 standards for race and ethnicity.
6. *American Indian or Alaskan Native*— A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
7. *Asian*— A person having origins in any of the original peoples of the Far East, East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
8. *Black or African American*— A person having origins in any of the Black racial groups of Africa.
9. *Hispanic/Latino*— A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin.
10. *Native Hawaiian or Other Pacific Islander*— A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
11. *White*— A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
12. *Two or More Races*— A person belonging to two or more racial groups.
13. *Unknown (Postsecondary only)*— A postsecondary student who does not self-identify a race and/or ethnicity on a local information collection.

CAR – Step 7. Performance Data (Continued)

14. *Special Population and Other Student Categories*— No information needs to be entered for this row. The special population count of the students enrolled in one or more State CTE approved courses. Unless otherwise noted, the following categories and definitions are described in section 3 of Perkins IV.
Enter special population counts for students enrolled in one or more State CTE approved courses. These rows may contain a duplicated student enrollment count; for example, a student may be both "limited English proficient" and "economically disadvantaged."
15. *Individual With Disabilities (ADA) (Postsecondary and adult only)*— Individuals with any disability as defined in section 3 of the Americans with Disabilities Act of 1990 (ADA). Under section 3(2) of the ADA, the term "disability" means, with respect to an individual
 - a physical or mental impairment that substantially limits one or more of the major life activities of such individual;
 - a record of such an impairment; or
 - being regarded as having such impairment.
16. *Economically Disadvantaged*— Individuals from economically disadvantaged families, including foster children.

17. *Single Parents*— The term "single parents" includes single pregnant women.
18. *Displaced Homemakers*— Individuals who
 - have worked primarily without remuneration to care for a home and family and for that reason has diminished marketable skills; (ii) have been dependent on the income of another family member but is no longer supported by that income; or (iii) are a parent whose youngest dependent child will become ineligible to receive assistance under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.) not later than 2 years after the date on which the parent applies for assistance under this title; and
 - are unemployed or underemployed and are experiencing difficulty in obtaining or upgrading employment.
19. *Limited English Proficient*— Secondary school students, adults, or out-of-school youth who have limited ability in speaking, reading, writing, or understanding the English language, and
 - whose native language is a language other than English; or
 - who live in a family or community environment in which a language other than English is the dominant language.
20. *Nontraditional Enrollees*— Occupations or fields of work, including careers in computer science, technology, and other current and emerging high skill occupations, for which individuals from one gender comprise less than 25 percent of the individuals employed in each such occupation or field of work.

CAR – Step 8. Program Improvement Plans

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REQUIRED STEPS	REPORT WORKSPACE										
1. Cover Page	<div style="text-align: right;">★ HELP ON THIS PAGE</div> <p>8. Program Improvement Plans</p> <p>1. Required Program Improvement Plans</p> <p>Directions: Your state has failed to meet at least 90% of the state adjusted level of performance for the core indicators of performance listed in the table below. Please provide a state program improvement plan addressing the items found in the column headings of the table below.</p> <table border="1"> <thead> <tr> <th>Core Indicator</th> <th>Disaggregated categories of students for which there were quantifiable disparities or gaps in performance compared to all students or any other category of students</th> <th>Action step to be implemented</th> <th>Staff member responsible for each action step</th> <th>Timeline for completing each action step</th> </tr> </thead> <tbody> <tr> <td>Placeholder Text</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p style="text-align: center;">Add an Action Step</p>	Core Indicator	Disaggregated categories of students for which there were quantifiable disparities or gaps in performance compared to all students or any other category of students	Action step to be implemented	Staff member responsible for each action step	Timeline for completing each action step	Placeholder Text	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Core Indicator		Disaggregated categories of students for which there were quantifiable disparities or gaps in performance compared to all students or any other category of students	Action step to be implemented	Staff member responsible for each action step	Timeline for completing each action step						
Placeholder Text		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
2. Reporting Information											
3. Use of Funds											
4. Technical Skill Attainment											
5. Financial Status Reports											
6. Enrollment Data											
7. Performance Data											
8. Program Improvement											
9. Review & Certification											

SAVE DRAFT **SAVE & CONTINUE**

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Instructions:

1. If your State failed to meet at least 90 percent of a State-adjusted level of performance for any of the core indicators of performance, this form will populate with the missed indicators. Fill out the following fields:
 - *Disaggregated Categories*— List the disaggregated categories of students for which there were quantifiable disparities or gaps in performance compared to all students or any other category of students.
 - *Action Steps*— Describe in detail the action steps that the State will implement, beginning in the current program year, to improve the State's performance on the core indicator overall and for the categories of students for which disparities or gaps in performance were identified.
 - *Staff Responsible*— Provide the name of the staff member(s) in the State responsible for each action step.
 - *Timeline*— Enter a date for completion of each action step.

CAR – Step 9. Review & Certification

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Home > Submit Your Report > CAR

REQUIRED STEPS	REPORT WORKSPACE
1. Cover Page	9. Review & Certification <i>Directions: In order to certify and submit your report, you must review and approve each section. Please click the button below to begin. If during your review, you identify errors or missing information, you must exit the review. Once you have made and saved your changes, you must restart the review process. If you have questions, please contact us.</i>
2. Options	
3. Use of Funds	
4. Technical Skill Attainment	
5. Financial Status Reports	
6. Enrollment Data	
7. Performance Data	
8. Program Improvement	
9. Review & Certification	
	Required Sections:
	1. Cover Page ✔ Completed
	2. Options ✔ Completed
	3. Use of Funds
	Part A ✔ Completed
	Part B ✔ Completed
	Part C ✔ Completed
	5a. Interim Financial Status Report ✘ Not Completed Go to section
	5b. Final Financial Status Report ✘ Not Completed Go to section
	6a. Participant Enrollment Data ✔ Completed
	6b. Concentrator Enrollment Data ✔ Completed
	7a. Secondary Performance Data ✘ Not Completed Go to section
	7b. Postsecondary Performance Data ✘ Not Completed Go to section
	8. Program Improvement ✘ Not Completed Go to section
	Start Review

1 (points to step 9 in the sidebar)

2 (points to 'Go to section' link for 5a)

3 (points to 'Start Review' button)

Review cannot begin until all of the required sections are completed.

Instructions:

The State Director must review and approve each section before the CAR may be certified and submitted to OCTAE for review.

- 1** The required sections and completion status are displayed on this page.
- 2** Click **Go to section** to continue working on a section.
- 3** Review cannot begin until all of the required sections are completed.

CAR – Step 9. Review & Certification (Continued)

PERKINS WEB PORTAL

Home | Submit Your Report | View & Download Reports | User Help Center

Home > Submit Your Report > CAR

REVIEW STATUS | **REPORT REVIEW** | [* Helpful Tips](#)

- Cover Page
- Reporting Information
- Use of Funds
- Technical Skill Assessments
- Financial Status Reports
- Enrollment Data
- Performance Data
- Program Improvement

1. Cover Page

Note to Reviewer: You cannot make changes while reviewing the report. If during your review, you identify errors or missing information, click the **EXIT REVIEW** button below. Once you have made and saved your changes, you must restart the review process. If no changes are required, click the **APPROVE SECTION** button.

1. Recipient Organization:

Organization Name:	Wyoming Dept of Education	City:	Cheyenne
Address 1:	Placeholder Text	State:	WY
Address 2:	2300 Capitol Avenue	Zipcode:	82002

2. Period covered by this report:

Start Date:

End Date:

3. PR/Award Numbers:

Title I Basic Grant to States:

4. Remarks: (Any explanation deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation)

Placement text.

5. Lead individuals completing this report:

- Please select the individual responsible for the **narrative performance information** in this report:
- Please select the individual responsible for the **financial status reports** in this report:
- Please select the individual responsible for the **performance data** in this report:
- Please select the **lead individual who may be contacted to answer questions** about this report:

1 EXIT REVIEW APPROVE SECTION **2**

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Instructions:

Review the information entered in each section.

1

If during your review, you identify errors or missing information, you must exit the review. Once you have made and saved your changes, click **Start Review** to continue the review process.

2

If complete and accurate information have been provided, click **Approve Section**.

CAR – Step 9. Review & Certification (Continued)

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Home > Submit Your Report > CAR

REVIEW STATUS	SUBMIT MY REPORT						
<ul style="list-style-type: none">Cover PageReporting InformationUse of FundsTechnical Skill AttainmentFinancial Status ReportsEnrollment DataPerformance DataProgram Improvement	<p>Certification</p> <p><i>Congratulations, you're almost done! Certify the accuracy and completeness of your report by entering your Personal Identification Number (PIN), Title/Agency, and the Date. Click the button below to submit for OCTAE review.</i></p> <p>CAR Certification:</p> <p>I certify to the best of my knowledge and belief that this report, consisting of narrative performance information, financial status reports (FSRs)*, and performance data, is accurate and complete.</p> <p>I understand that the U.S. Department of Education will use only the performance data that it receives by the December 31 submission deadline each year to determine whether my state has met at least 90 percent of its agreed upon state adjusted performance levels for each of the core indicators of performance under section 113 of Title I of the Act or whether the state must submit a program improvement plan as required in section 123(a)(1) of Perkins IV.</p> <p>I further understand that the use of the Personal Identification Number (PIN) supplied to me by the Department to certify and submit the CAR is the same as certifying and signing the document with a hand-written signature.</p> <p>1</p> <table><tr><td>Signature of Authorized Individual (PIN):</td><td><input type="text"/></td></tr><tr><td>Title/Agency:</td><td><input type="text"/></td></tr><tr><td>Date:</td><td><input type="text"/></td></tr></table> <p>2 SUBMIT MY REPORT</p>	Signature of Authorized Individual (PIN):	<input type="text"/>	Title/Agency:	<input type="text"/>	Date:	<input type="text"/>
Signature of Authorized Individual (PIN):	<input type="text"/>						
Title/Agency:	<input type="text"/>						
Date:	<input type="text"/>						

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Instructions:

1. Once all of the required steps have been reviewed and approved, the State Director must certify this form.

Note

Instructions for obtaining a Personal Identification Number (PIN) will be provided to State Directors separately.

2. Click **Submit My Report** to submit the report for OCTAE review.

- The report will become read-only once it has been submitted for OCTAE review.
- During OCTAE review, requests for revision may be emailed to the State Director. At that time the steps requiring revision will be available for editing.