## **Charter Schools Program (CSP)**

### Office of Innovation and Improvement U.S. Department of Education

#### CSP Data Collection Form - Non-SEA Grantees

#### Instructions

#### Purpose of Data Collection:

The new data collection will collect CSP grant award information from grantees (State Educational Agencies (SEAs) and non-SEAs) to create a new database of data from current applicants receiving a CSP grants. The CSP Data Collection Form will allow the U.S Department of Education (ED) to monitor CSP grant performance and analyze data related to accountability for academic performance and financial integrity. The data collection will assist in carrying out the purpose of the Charter School Program Section 5201 of the ESEA, which is to expand the number of high quality charter schools and increase the national understanding of the charter school model.

Charter schools (or other organizations) receiving CSP grants directly from the U.S. Department of Education are asked to complete the following worksheet entitled "Data

#### For Direct Grant Recipients:

Collection Form: Direct Grant Recipients." This form has two parts. Part A asks for confirmation of CSP non-SEA award information. The school/grantee name, contact person, and PR/award number has already been entered in the form. If this information is incorrect, please contact the data collection administrators (see "Contact Information" below).

**Part B** asks for specific CSP award information that is not included in your Grant Award Notification (GAN). Please provide the following information for your non-SEA award: 1) the name and contact information for the charter school and LEA; 2) the charter school's management organization (CMO, EMO or freestanding); 3) the authorized public chartering agency; 4) the total amount of funding an applicant received to start a charter school, along with the amount of funds expended and the beginning and end date of the grant project period and budget periods; and 5) other charter school information (e.g., enrollment) as needed.

#### Form Submission:

Completed CSP Data Collection Forms should be sent to

CSPdatacollection@wested.org. In the subject heading please include "CSP Data Collection" followed by your school name. Please be sure to save a copy of the completed form for your own records.

If an electronic copy cannot be sent, please send a paper copy of the completed data collection form to the following address:

WestEd

Attn: CSP Data Collection 4665 Lampson Ave. Los Alamitos, CA 90720

Please be sure to make a copy of the completed form for your own records.

#### **Contact Information:**

If you have any questions or concerns regarding the completion of the data collection form, please contact WestEd. You can email us at CSPdatacollection@Wested.org, or call toll-free 866-902-4887.

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 1855-0016. The time required to complete this information collection is estimated to average 127 hours per response, including the time to review instructions, Paperwork Burden Stateme search existing data resources, gather the data needed and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4537. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: U.S. Department of Education, Office of Innovation and Improvement 400 Maryland Avenue, S.W., LBJ-4W227, Washington D.C. 20202-2800.

# **Charter Schools Program**

# Office of Innovation and Improvement U.S. Department of Education

#### **Data Collection Form: Non-SEAs**

#### Part A

School:

School Contact Person:

Title of Contact Person:

PR/Award #:

Project Period Begin Date:

Project Period End Date:

#### Breakdown of Obligated Funds per Fiscal Year

	<b>Grant Award Amount</b>	Supplemental Award Amount		
FY 2014	\$0	\$0		
FY 2015	\$0	\$0		
FY 2016	\$0	\$0		
FY 2017	\$0	\$0		

Total Award Amount Obligated: \$0

<u>Comments?</u> If any of the above information is incorrect, or if you need to provide any additional information regarding your CSP grant, please use the box below. You may also direct comments to us at CSPdatacollection@Wested.org, or call toll-free 866-902-4887.

Please turn to <u>Part B</u> to provide specific data for your grant

OMB Number: 1855-0016 Approval Expires 5/31/2018

<b>D</b> a	ta Collection	n Form: Non-	SEAs (continue	ed)				
Part B: CSP Grant Award Information following information for your non-SEA award: 1) the full name and contact information for the charter school (and charter								
developer, if different than the charter 1) Charter School Contact Informat	\ award: 1) the fu school); 2) The t <b>ion</b>	otal amount of fur	act information for the nding an applicant re	e charter school (a ceived to start a c	harter school; 3)			
Charter School Name and Contact I	Charter School Management Organization							
Charter school name	Management Organization Type							
School NCES ID	Management C	Organization Name						
School mailing address	Management Organization address							
address line 1:			address line 1:					
address line 2:		address line 2:						
city:		city:						
state:		state:						
zipcode:		zipcode:						
LEA Information			ublic Chartering Ag	jency				
LEA name			e (choose one)					
LEA NCES ID		Authorizer Name						
LEA mailing address  address line 1:		Autr	norizer mailing address address line 1:					
address line 1:			address line 1:					
city:			city:					
state:			state:					
			zipcode:					
zipcode: Does the charter school act as its own			,					
LEA? Is it an LEA with only charter schools?								
2) Grant Award and Expenditures I	nformation							
Project Period Begin Date		Dlease provid	e the breakdown of fu	inde obligated to t	hic grantee from			
Project Period End Date			Fiscal Year and the a					
Taraba and America Allifornia			ated across one or mo		qual the Total			
Total Grant Award Amount Obligated:	\$	Award Amoun	it provided on the left					
In addition to providing the breakdown of funds obligated, please list the budget period for the time funds were obligated, and whether the awards were used for preplanning, planning, implementation or dissemination purposes.								
	FY 2017	FY 2016	FY 2015	FY 2014	<u>Totals</u>			
Dollar amount of grant award	\$	\$	\$	\$	\$0.00			
Total amount expended to date	\$	\$	\$	\$	\$0.00			
Anticipated expenditures through end of	\$	\$	\$	\$	\$0.00			
FY Beginning date of grant budget period	mm/dd/yy	mm/dd/yy	mm/dd/yy	mm/dd/yy	\$0.00			
		, , ,						
End date of grant budget period	mm/dd/yy	mm/dd/yy	mm/dd/yy	mm/dd/yy	The remainder above is the			
Type of grant (choose one)					carryover amount			
3) Charter School Operation								
School year in which the school first enro	lled students							
		School enrollment (if not opened, enter "0")	Number of studer on waitlist to enro each year (if no opened, enter "N	oll t				
School enrollment and waitlist figures in 2								

<u>Comments?</u> If you need to provide any additional information regarding this CSP subgrant, please use the box below. You may also direct comments to us at CSPdatacollection@Wested.org, or call toll-free 866-902-4887.