



Economic Development Administration  
GPRA Data Collection Form

University Centers

PART I

Date \_\_\_\_\_

Recipient Name \_\_\_\_\_

Full Address \_\_\_\_\_

Authorized Contact \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email (not optional) \_\_\_\_\_

EDA Investment Technical Assistance - University Center \_\_\_\_\_

Investment Number \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Award Period \_\_\_\_\_ to \_\_\_\_\_

Description of Activities: \_\_\_\_\_

Technology \_\_\_\_\_

Economic Development \_\_\_\_\_

PART II

Recipients are required to report the following:

- a. Number of University Center (UC) clients provided 8 or more hours of technical assistance. \_\_\_\_\_  
*(count only clients who received UC technical assistance; count only once even if it received assistance for more than one task)*
- b. Number of UC clients reported in a taking action as a result of the assistance facilitated by UC. \_\_\_\_\_
- c. Number of those actions taken by UC clients reported in b that achieved the expected results. \_\_\_\_\_  
*(Please attach a list of clients and actions that achieved expected results)*
- d. Estimated number of jobs created or retained as a result of c. \_\_\_\_\_
- e. Estimated amount of private sector investment generated as a result of c. \_\_\_\_\_



Economic Development Administration  
GPRA Data Collection Form

**University Centers**

f. Estimated amount of public sector investment generated as a result of c. \_\_\_\_\_

g. Other economic benefits resulting from technical assistance (*written examples, dollar amounts can be included as part of the example*).

---

---

h. Categorize type of assistance provided:

	<u>Quantity</u>		<u>Quantity</u>
Economic development plan	_____	Partnership Strategies	_____
Strategic partnering to	_____	Project Management	_____
Public-or private sector entities	_____	GIS Service	_____
Client Services	_____	Studies	_____
Technology Transfer	_____	Business Sector Services	_____

OMB Approved ED-917  
OMB Control Number 0610-0098