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# U.S. Department of Education (ED) Comprehensive Literacy State Development (CLSD) Program Annual Performance Report (APR) Redesign

## CLSD Annual Performance System Overview

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[Explanation: When grantees enter the web-based reporting system, they are taken to a main menu that allows them to access the sections described in detail in this document. The Resources page is a new section and will allow grantees to download guidance documents for completing the appropriate performance report and using the web-based reporting system. It requires no data entry.]

## Template Usage

*Instructions:* Check only one box per program office instructions.

- Annual Performance Report (APR)
- Ad Hoc Annual Performance Report (Ad Hoc APR)
- Final Performance Report (FPR)

## Instructions

Before you begin, please read relevant guidance documents from the ED program office and *CLSD Performance Reporting User Guide*. To access these documents, click on the resources below.

## Resources

[Explanation: Hyperlinks will be included here to relevant annual guidance letters, CLSD Performance Reporting User Guide, and other relevant resources to support APR completion. This is a new section.]

## Cover Page

[Explanation: Grantees complete one cover sheet per performance report. After entering the information, the grantee prints the cover sheet, has it signed by the grantee's authorized representative, and uploads a PDF of the signed copy to the web-based system to be included in the final PDF of the performance report. This information is currently captured in the APR, which utilizes the approved ED 524B.]

## Cover Sheet

*Instructions:* Please respond to the prompts below. In item 5, please type the name of the person who will provide the authorizing signature. Print this page, collect the authorizing signature, and then upload the scanned document.

1. Performance measure status: Are complete data on performance measures for the current budget period included in the Project Status Chart? [Y/N Checkbox. If Yes is selected, skip to Item 2. If No is selected, Item 1a appears.]
  - a. When will the data be available and submitted to ED? [Narrative Box]
2. Please enter/upload executive summary. [Upload][Narrative Box]
3. Project information (PR Award Number, Grantee, etc.) [Narrative Box]
4. Performance period [Prepopulated Dates]
5. Authorized representative signature [Narrative Box]

## Executive Summary

[Explanation: Grantees currently complete one executive summary per performance report. Grantees can type their responses into a text box or upload a summary. In the revised template, they will respond to individual prompts via text box with the option to upload any additional information. The fifth item referencing implementation and sustainability will be asked only in Years 3–5 of the grant. This narrative

helps the program office get information on the project’s progress that is not captured through data entry.]

*Instructions:* Please complete the table below. If you would like to submit information to supplement your responses, you may upload this information as an attachment.

<b>Instruction</b>	<b>Response</b>
Explain project highlights or achievements related to project goals.	Enter Text
Explain challenges to your project and how they were addressed.	Enter Text
Identify and explain unanticipated changes impacting your project.	Enter Text
Describe any contributions the project has made to research, knowledge, practice, and/or policy.	Enter Text
Based on your progress and implementation, describe the activities you plan to sustain after grant activities end.	Enter Text
Provide any additional information you would like us to know.	Enter Text

- Please upload any additional information you would like to provide (optional). Describe any additional documentation in the textbox below. [Textbox and Upload Box]

## Section A – Program Performance Measure (PPM) Information (34 C.F.R. 75.110)

[*Explanation:* Grantees have either four or five PPMs depending on their cohort. When grantees enter the PPM section of the web-based system during Year 1, they will see the table below. This table asks them to enter their Year 1 target or baseline data and their milestone targets. For each PPM, grantees enter a percentage. During Years 2–5 of grant implementation, the fields in the table will be prepopulated with the previous year’s data. The “Year 1/2/3/4/5 Actual” fields will open and allow grantees to enter data about their actual performance during that year and whether they met their original targets. When grantees enter their “Actual” data, the “Met/Not Met” checkbox will prepopulate based on whether their response meets the criteria set in their target. Grantees will have the ability to describe the activities implemented during the performance period. These data are aggregated annually to track program progress as well as help track the project’s progress in meeting the goals stated in the grant application. PPM data are currently gathered through the APR.]

*Instructions:* Provide data for each PPM and describe findings or outcomes to demonstrate that you have met or are making progress toward meeting the PPM. Please enter your data as a percent.

<b>PPM 1:</b>			<b>[Notes]</b>
Increase the percentage of participating 4-year-old children who achieve significant gains in oral language skills.			
	<b>Percent</b>	<b>Please indicate whether this is a baseline or target and how the number was calculated.</b>	
<b>Baseline or</b>	Enter %	Enter Text	<i>This is only open</i>

Target				Year 1.
Milestones	Percent	Status of Progress	If measure was "Not Met," describe <u>how</u> and <u>when</u> the measure will be met and outline any steps and/or strategies that will help ensure continued progress.	
Year 2 Target	Enter %			
Year 2 Actual	Enter %	<input type="checkbox"/> Met <input type="checkbox"/> Not Met	Enter Text	This is only open end of Year 2.
Year 3 Target	Enter %			
Year 3 Actual	Enter %	<input type="checkbox"/> Met <input type="checkbox"/> Not Met	Enter Text	This is only open end of Year 3.
Year 4 Target	Enter %			
Year 4 Actual	Enter %	<input type="checkbox"/> Met <input type="checkbox"/> Not Met	Enter Text DRAFT	This is only open end of Year 4.
Year 5 Target	Enter %			
Year 5 Actual	Enter %	<input type="checkbox"/> Met <input type="checkbox"/> Not Met	Enter Text	This is only open end of Year 5.

[Note: Table will repeat for each PPM with identical format.]

## Section B – Project-Specific Performance Measures (PSPMs) Information (34 C.F.R 75.110)

[Explanation: Grantees have established goals and objectives in their approved application. At the start of a grant, program officers will use the PSPMs Chart (included in this package) to identify the corresponding PSPMs, and ensure that they are appropriate and measurable. When grantees enter the PSPMs section of the web-based system during Year 1, they will see the table below. This table asks them to enter their baseline data (if available) and annual targets. For each PSPM, grantees enter either a raw number or a ratio/percentage. During Years 2–5 of grant implementation, the fields in the table will be prepopulated with the previous year’s data. The “Year 1/2/3/4/5 Actual” fields will open and allow grantees to enter data about their actual performance during that year and whether they met their original targets. When grantees enter their “Actual” data, the “Met/Not Met” checkbox will prepopulate based on whether their response meets the criteria set in their target. These data help the ED program office and the grantee track the project’s progress in meeting the goals stated in the grant application. These data are currently being collected as part of the APR.]

Instructions: Enter each PSPM below using the “+” button to add additional PSPMs as needed. During Year 1, you must enter the PSPM and baseline/target information. In future years, these data will be pre-populated. Provide data for each performance measure and describe findings or outcomes to demonstrate that you have met or are making progress toward meeting the PSPM. You may enter your

data as a whole number or a ratio/percent. Please note the format in which you choose to report your data (ratio or percent) must be consistent through the duration of your grant.

PSPM 1: [Narrative Box]						[Notes]
	Whole Number	Ratio	Percent		Please indicate whether this is a baseline or target and how the number was calculated.	
Baseline or Target	Enter Number	■ / ■	Enter %		Enter Text	This is only open Year 1.
Milestones	Whole Number	Ratio	Percent	DRAFT Status of Progress	If measure was not met, please provide more information including other growth measures and context about student progress.	
Year 2 Target	Enter Number	■ / ■	Enter %			
Year 2 Actual	Enter Number	■ / ■	Enter %	0 Met 0 Not Met	Enter Text	This is only open end of Year 2.
Year 3 Target	Enter Number	■ / ■	Enter %			
Year 3 Actual	Enter Number	■ / ■	Enter %	0 Met 0 Not Met	Enter Text	This is only open end of Year 3.
Year 4 Target	Enter Number	■ / ■	Enter %			
Year 4 Actual	Enter Number	■ / ■	Enter %	0 Met 0 Not Met	Enter Text	This is only open end of Year 4.
Year 5 Target	Enter Number	■ / ■	Enter %			
Year 5 Actual	Enter	■ / ■	Enter %	0 Met	Enter Text	This is

	Number			0 Not Met		only open end of Year 5.
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- [+ Button to add additional PSPM tables]

## Section C – State-Level Activities

[*Explanation:* Grantees may use up to 5% of awarded funds on state-level activities. The table below asks grantees to identify and describe the activities they perform with these funds, if applicable. It also asks for data about (1) the status of each grantee’s state literacy plan, which is a requirement under the grant; (2) whether grantees are working with external evaluators; and (3) whether there is any new legislation related to literacy. This information will inform the program office about grant implementation and context. These data are new to the APR.]

*Instructions:* Follow the prompts below to enter information about the state-level activities for your CLSD grant.

- Please select and describe any relevant state-level activities your project performs from the list below. Select all that apply.

DRAFT

Select all that apply.	State-Level Activities	Describe how this is being implemented.	List general accomplishments, challenges, or changes to this activity.	Describe how you determine the effectiveness of this activity.
..	Providing technical assistance, or engaging qualified providers to provide technical assistance, to eligible entities to enable the eligible entities to design and implement literacy programs	Enter Text	Enter Text	Enter Text
..	Coordinating with institutions of higher education (IHEs) in the State to provide recommendations to strengthen and enhance pre-service courses for students preparing to teach children from birth through grade 12 in explicit, systematic, and intensive instruction in evidence-based literacy methods	Enter Text	Enter Text	Enter Text

..	Reviewing and updating, in collaboration with teachers and institutions of higher education, State licensure or certification standards in the area of literacy instruction in early education through grade 12	Enter Text	Enter Text	Enter Text
..	Making publicly available, including on the SEA's website, information on promising instructional practices to improve child literacy achievement	Enter Text	Enter Text	Enter Text
..	Administering and monitoring the implementation of subgrants by eligible entities	Enter Text	Enter Text	Enter Text
..	Developing literacy coach training programs and training literacy coaches	DRAFT Enter Text	Enter Text	Enter Text
..	Administration and evaluation of CLSD activities	Enter Text	Enter Text	Enter Text
<b>Other Activities</b>				
..	[Please define]	Enter Text	Enter Text	Enter Text
[+ Button for additional rows]				

1. Does your project engage an external evaluator? [Y/N Checkbox]
2. Did your state or territory pass any literacy legislation during the performance period? [Y/N Checkbox. If Yes is selected, Items 2a and 3 appear. If No is selected, skip to Item 4.]
  - a. Legislation Title and Date of Enactment [Narrative Box]
3. What impact could this legislation have on your CLSD project? [Narrative Box]
4. What categories of stakeholders are on your state literacy team? Select all that apply. [Checkboxes]
  - Families
  - Community partners
  - Libraries
  - Early Childhood
  - IHEs
  - Teachers
  - Principals
  - Local Education Agency (LEA) leadership
  - State Education Agency (SEA) leadership
  - Unknown
  - Other [Narrative Box]

5. What is the status of your state literacy plan? (Grantees can only select ONE option from the list below).
- a. Our state literacy plan is being developed (radio button) (if selected answer questions 5i – 5ii)
    - i. What is the status of development? [Narrative Box]
    - ii. When will the state literacy plan be completed? [Narrative Box]
  - b. Our state literacy plan is being revised. (radio button) (if selected answer questions 5i – 5ii)
    - i. What is the status of development? [Narrative Box]
    - ii. When will the state literacy plan be completed? [Narrative Box]
  - c. Our state literacy plan is current. (radio button) (if selected answer questions 5i – 5iv)
    - i. Provide a link or upload your current state literacy plan. [Narrative Box/Upload]
    - ii. When was the state literacy plan developed? [Narrative Box]
    - iii. Was the state literacy team involved in the development of the state literacy plan?  
Y/N DRAFT
    - iv. When is it scheduled to be revised? [Narrative Box]
6. In addition to your state literacy team, which stakeholder groups are, or were, engaged in the development process? Select all that apply. [Checkboxes]
- a. Families
  - b. Community partners
  - c. Libraries
  - d. Early Childhood
  - e. IHEs
  - f. Teachers
  - g. Principals
  - h. LEA leadership
  - i. SEA leadership
  - j. Unknown
  - k. Other [Narrative Box]
7. Do you provide guidance to LEAs regarding the development of local literacy plans? [Y/N Checkbox. If Yes is selected, Item 8 appears. If No is selected, skip to Section D]
8. Optional: Provide a link or upload your guidance to LEAs regarding the development of local literacy plans. [Narrative Box/Upload]

## Section D – Subgrant Competition Information

[Explanation: This section will be completed during Years 1-5. If the response to Question 1 is "Yes", grantees will complete subquestions 1a-1i. This information will help the ED program office understand the status of subgrant competitions and how those competitions may impact grant implementation and the current grant budget. This information is new to the APR.]



*Instructions:* Follow the prompts below to provide information about your subgrant competition. If you did not hold a subgrant competition this year, please answer “No” to item 1 and move on to item 2.

1. Did you hold a subgrant competition this year? [Y/N Checkbox. If Yes, questions below appear with narrative boxes. If No, skip to Item 2.]
  - a. Please provide a narrative overview of your subgrant award process, including the peer review of applications. [Narrative Box]
  - b. Did you collaborate with your state agency(ies) responsible for administering early childhood education programs, including the agency responsible for administering childcare programs and, if applicable, the State Advisory Council on Early Childhood Education and Care designated or established pursuant to section 642(b)(1)(A)(i) of the Head Start Act, in making and implementing subgrants for early childhood education? [Y/N Checkbox]
  - c. Describe any changes to your subgrants (e.g., new subgrants were awarded or subgrants that ended). [Narrative Box]
  - d. How many applications did you anticipate? [Number Box]
  - e. How many applications did you receive? [Number Box]
  - f. What was the total number of grants awarded? [Number Box]
  - g. What is the total dollar amount of funds awarded? [Dollar Number Box]
  - h. What is the period of performance for subgrants? [Narrative Box]
  - i. Did you hold more than one competition? [Y/N Checkbox. If Yes is selected, the question below appears with narrative box. If No is selected, skip to Item 2.]
    - How many did you hold and why? [Narrative Box]
2. Do you anticipate holding future competitions? [Y/N Checkbox. If Yes is selected, question below appears with narrative box. If No is selected, skip to next section.]
  - a. Describe the purpose of future competitions and anticipated competition dates for this upcoming year. [Narrative Box]

## Section E – Subgrantee Details

*[Explanation:* The subgrantee demographics and activities questions will be completed during Year 1 of implementation, then will prepopulate as part of Years 2-5 reporting with the question, “Do you wish to update any information about subgrantees?” If grantees respond “Yes,” then the fields will unlock, and they will be able to update. This information is new to the APR.]

### Demographics

*[Explanation:* Data in this table will be inputted during Year 1 of the grant. It will be prepopulated in Years 2-5 and will have an additional column asking the grantee to describe any changes to the previous year’s data.]

*Instructions:* Please complete one row for each subgrantee. Use the “+” button to add rows if needed.

#	Full Name of Subgrantee	Total Amount Approved in the Subgrant Application	Total Amount Awarded to Date	Number of Schools Served by Subgrant	Performance Period for This Subgrant	Age Groups Served by This Subgrant (Select all that apply.)	Subgroups Served by This Subgrant (Select all that apply.)	Please describe any changes to this subgrant. [This will
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								<b>only appear in Years 2-5.]</b>
1	Enter Text		Enter Dollar Amount	Enter Number	Enter Text	<input type="checkbox"/> Birth-Age 5 <input type="checkbox"/> Kinder- garden-5th Grade <input type="checkbox"/> 6th-8th Grade <input type="checkbox"/> 9th-12th Grade	<input type="checkbox"/> Students with disabilities <input type="checkbox"/> English learners/ multi- lingual learners <input type="checkbox"/> Students in poverty	Enter Text
2	Enter Text		Enter Dollar Amount	Enter Number <small>DRAFT</small>	Enter Text	<input type="checkbox"/> B Birth-Age 5 <input type="checkbox"/> Kinder- garden-5th Grade <input type="checkbox"/> 6th-8th Grade <input type="checkbox"/> 9th-12th Grade	<input type="checkbox"/> Students with disabilities <input type="checkbox"/> English learners/ multi- lingual learners <input type="checkbox"/> Students in poverty	Enter Text
3	Enter Text		Enter Dollar Amount	Enter Number	Enter Text	<input type="checkbox"/> Birth-Age 5 <input type="checkbox"/> Kinder- garden-5th Grade <input type="checkbox"/> 6th-8th Grade <input type="checkbox"/> 9th-12th Grade	<input type="checkbox"/> Students with disabilities <input type="checkbox"/> English learners/ multi- lingual learners <input type="checkbox"/> Students in poverty	Enter Text
4	Enter Text		Enter Dollar Amount	Enter Number	Enter Text	<input type="checkbox"/> Birth-Age 5 <input type="checkbox"/> Kinder- garden-5 <sup>th</sup> Grade <input type="checkbox"/> 6 <sup>th</sup> -8 <sup>th</sup> Grade <input type="checkbox"/> 9 <sup>th</sup> -12 <sup>th</sup> Grade	<input type="checkbox"/> Students with disabilities <input type="checkbox"/> English learners/ multi- lingual learners <input type="checkbox"/> Students in poverty	Enter Text
[+ Button to add more rows as needed]								

### Activities

[Explanation: Grantees will enter data into this table during Year 1. The table will be prepopulated in Years 2-5 and will give grantees the option to update fields if needed.]

*Instructions:* In the table below, select the major activities implemented by subgrantees. If there are additional activities not captured by this list, please use the “+” button to add rows. If you would like to provide any additional information on these activities, please use the narrative box below the table.

Select all that apply.	Activities
<b>Early Childhood (Birth–Age 5)</b>	
..	Administering early childhood education programs and services, including the state agency responsible for administering child care programs, and, if applicable, the State Advisory Council on Early Childhood Education and Care designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)), use a portion of the grant funds, in accordance with section 2222(d)(2)(D) (i), to award subgrants, on a competitive basis, to eligible entities to enable the eligible entities to support high-quality early literacy initiatives for children from birth through kindergarten entry.
..	Other (Please define)
<b>Grades K–5</b>	
..	Developing and implementing a comprehensive literacy instruction plan across content areas for such children that serves the needs of all children, including children with disabilities and English learners, especially children who are reading or writing below grade level.
..	Developing and implementing a comprehensive literacy instruction plan across content areas for such children that provides intensive, supplemental, accelerated, and explicit intervention and support in reading and writing for children whose literacy skills are below grade level.
..	Developing and implementing a comprehensive literacy instruction plan across content areas for such children that supports activities that are provided primarily during the regular school day but that may be augmented by after-school and out-of-school time instruction.
..	Providing high-quality professional development opportunities for teachers, literacy coaches, literacy specialists, English as a second language specialists (as appropriate), principals, other school leaders, specialized instructional support personnel, school librarians, paraprofessionals, and other program staff.
..	Training principals, specialized instructional support personnel, and other local education agency personnel to support, develop, administer, and evaluate high-quality kindergarten through grade 5 literacy initiatives.
..	Coordinating the involvement of early childhood education program staff, principals, other instructional leaders, teachers, teacher literacy teams, English as a second language specialists (as appropriate), special educators, school personnel, and specialized instructional support personnel (as appropriate) in the literacy development of children served under section <a href="#">2224 (c) (4)</a> .
..	Engaging families and encouraging family literacy experiences and practices to support literacy development.
..	Other (Please define)
<b>Grades 6–12</b>	

..	Developing and implementing a comprehensive literacy instruction plan described in section <a href="#">2224 (d)(1)</a> for children in grades 6 through 12.
..	Training principals, specialized instructional support personnel, school librarians, and other local education agency personnel to support, develop, administer, and evaluate high-quality comprehensive literacy instruction initiatives for grades 6 through 12.
..	Assessing the quality of adolescent comprehensive literacy instruction as part of a well-rounded education.
..	Providing time for teachers to meet to plan evidence-based adolescent comprehensive literacy instruction to be delivered as part of a well-rounded education.
..	Coordinating the involvement of principals, other instructional leaders, teachers, teacher literacy teams, English as a second language specialists (as appropriate), paraprofessionals, special educators, specialized instructional support personnel (as appropriate), and school personnel in the literacy development of children served under section <a href="#">2224 (d)(5)</a> .
..	Other (Please define)

<b>Additional Information About Subgrantee Activities (Optional)</b>
Enter Text

## Section F – Budget Information

DRAFT

[*Explanation:* Grantees enter expenditure information during each reporting period. They report expenditures in the following categories: personnel, fringe, travel, equipment, supplies, contractual, other, indirect costs, and training stipends. The system includes four columns reflecting each quarter, which they update with their expenditures for that quarter. There is a total spent and remaining funds column that automatically calculates the expenditures thus far and the balance. Grantees will complete and upload an Excel tool as part of the budget section of the APR. These data are collected in the current APR; the Excel tool would be a new instrument for grantees to complete.]

### Indirect Costs

If you are requesting reimbursement for indirect costs, please answer the following questions:

1. Do you have a current Indirect Cost Rate Agreement approved by the U.S. Department of Education? [Y/N Checkbox. If Yes is selected, Item 1a appears. If No is selected, skip to Item 5.]
  - a. What is the period covered by the agreement? [Date – Date]
2. What is the approving federal agency? [ED]
3. What is the indirect cost rate percentage? [Number]
4. Please upload indirect cost documentation. [Upload]
5. Provide an update on the status of the indirect cost rate agreement.

### Budget Tool

Please complete and upload the Excel Budget Tool. [Upload]

### Nonfederal Funding Sources

Please describe other major funding sources for literacy initiatives from your SEA. [Narrative Box]

## Section G – Project-Specific Performance Measures Chart

[Explanation: Grantees will use this chart at the start of their project. They will enter the measures specified in their grant application, baseline data (if available), and targets for each performance period.]

### Comprehensive Literacy State Development (CLSD) Program FY 2020 - Project-Specific Performance Measures Chart

#### Establishing Measures and Targets

[Explanation: The matrix below would be provided to new grantees only upon receipt of their Year 1 Grant Award Notification (GAN). The assigned ED program officer would work with the project director to review the goals and objectives in the application, identify the corresponding performance measures, and ensure that they are appropriate and measurable. If baseline data is available, targets will be noted in this chart and where necessary they will align with any targets established in the application. If baseline data is unavailable for a particular measure Year 1 will serve as the baseline and targets for subsequent years will be developed accordingly.]

**Grantee Name: Smith State Department of Education**  
**PR/Award Number: S371C200001**

		2020-21 (Year 1)			2021-2022 Target (Year 2)	2022-2023 Target (Year 3)	2023-2024 Target (Year 4)	2024-2025 Target (Year 5)
		Baseline	Ratio	%				
<b>Goals</b>	<b>Project-Specific Performance Measures</b>							
<b>Goal #1: Improve Oral Language Skills in 4 year-olds served by the project</b>	<b>Indicator #1.1:</b> By Year 5, provide professional development and outreach services to 500 Head Start teachers.	25	N/A	N/A	125	225	350	500
	<b>What instrument will you use to collect data for this measure?</b>  Sign in sheets will be provided at each professional development meeting.							

#### Public Burden Statement

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 18xx-xxxx. Public reporting burden for this collection of information is estimated to average nine (9) 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 (34 C.F.R.75.720). If you have any comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual form, application or survey, please contact Michael Berry at michael.berry@ed.gov directly.