

Sections of Annual Performance Report

<u>Sections</u>	<u>Type</u>	<u>Reporting File</u>	<u>Submitted As</u>
Cover Sheet	Text/Signature	MS Word	PDF
Block A	Numerical	MS Excel	MS Excel
Block B	Numerical	MS Excel	MS Excel
Block C	Numerical	MS Excel	MS Excel
Block D	Numerical/Text	MS Excel	MS Excel
Block E	Numerical/Text	MS Excel	MS Excel
Block F	Numerical/Text	MS Excel	MS Excel

The Annual Performance Report (APR) is organized into two (2) files:

Cover Sheet (PDF).
Performance Report MS Excel Form: Blocks A-F (Excel Sheet).

The Office of Migrant Education (OME) has divided the APR into two sections due to the two types of content: text and numerical. The above table summarizes the sections (blocks), the type of files being used, and how they are being submitted.

The table also clarifies that the **Cover Sheet** is to be submitted as **PDF** since it contains authorized signatures. The **Performance Report Data Form** is to be submitted as MS. Excel.

Please send FINAL versions of these sections (2 files in total) as attachments to OME in ONE email.

Color Coding for Convenience		No Data	No Data
<u>Highlighted Color</u>	<u>Interpretation</u>	No Data	No Data
Blue	Enter Numerical	No Data	No Data
Green	Enter Text/Error Message	No Data	No Data
<p>OMB No. 1810-0684 Exp. Xx/xx/xxx</p> <p>Paperwork 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 1810-0684. The time required to complete this information collection is estimated to average 23 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have 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. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Migrant HEP program, U.S. Department of Education, 400 Maryland Avenue, SW, Washington, D.C. 20202-4651.</p>		No Data	No Data
End of Spreadsheet		No Data	No Data



No Data

GI
PF

Grant Year:

Reporting Period

Choose from the Drop-Down List

2023-2024

No Data

High School Equivalency Program U.S. Department of Education Annual Performance Report Data Form

A. HEP Project Statistics and Performance Reporting No Data

Reporting Block, Item A1 **Reporting Block A1 Item**

A1. Number of students served during the reporting period.

A1.a. Number **funded** to be served.

A1.b. Number **served** in HEP HSE instruction (note: A1b1 + A1b2 should sum to equal A1b).

A1.b.1. Number served who were **new participants** (first year in HEP) (subset of A1b).

A1.b.2. Number served who were **returning participants** (subset of A1b).

Reporting Block, Item A2 **Reporting Block A2 Item**

A2. Status at the end of the reporting period. (Note: A2a-c should sum to equal the number reported in A1b.)

A2.a. Number of HSE **attainers**. (Obj. 1 National Target: 69%) (Program Performance Measure 1)

A2.a.1. Number of HSE attainers who were new participants.

A2.a.2. Number of HSE attainers who were returning participants.

A2.a.3. Number of HSE attainers who passed the HSE assessment in the English Language.

A2.a.4. Number of HSE attainers who passed the HSE assessment in the Spanish Language.

A2.a.5. Number of HSE attainers who passed the HSE assessment in a language other than English or Spanish.

A2.b. Number of **withdrawals**.

A2.b.1. Number of withdrawals who were new participants.

A2.b.2. Number of withdrawals who were returning participants.

A2.c. Number of **persisters** (persisters were enrolled in instructional services in the performance period you are reporting but did not attain an HSE and reenrolled in instructional services for the subsequent performance period by the APR due date).

Your data input accuracy result

Reporting Block, Item A3 **Reporting Block A3 Item**

A3. Placement of HSE attainers (from question A2a above) from the performance period you are reporting.

A3.a. Unduplicated number of HSE **attainers** who **entered** postsecondary education or training programs, upgraded employment, or the military (count each participant only once for this for this row for an unduplicated count). (This amount should not be greater than the amount in A2a above, and should equal the sum of A3a 1-3) (Obj. 2 National Target: 80%) (Program Performance Measure 2).

A3.a.1. Number of HSE attainers who **entered postsecondary** education or **training** programs.

A3.a.2. Number of HSE attainers who **obtained upgraded employment**.

A3.a.3. Number of HSE attainers who **entered the military**.

Reporting Block, Item A4 **Reporting Block A4 Item**

A4. Follow-up on HSE attainers from the reporting period.

A4.a.	Number of HSE attainers you were able to track for follow-up data.
Reporting Block, Item A5	Reporting Block A15 Item
A5.	Time to completion for HSE attainers from question A2a above. (Note: A5a-c should sum to equal th
A5.a.	Number of HSE attainers who got their HSE within one reporting period of your project.
A5.b.	Number of HSE attainers who got their HSE after more than one , but within two reporting periods of your project.
A5.c.	Number of HSE attainers who got their HSE after more than two reporting periods of your project.
	Your data input accuracy result
Reporting Block, Item A6	Performance Calculation Table
Annual Award Amount	
Program Performance Measure 1	0.00%
Program Performance Measure 2	0.00%
Success efficiency ratio	\$0

End of spreadsheet

No Data

No Data

No Data
No Data
No Data
No Data

No Data

No Data

Reporting Block A1 Response

0

Reporting Block A2 Response

A1b(no. served).
0
0

Good Job

Reporting Block A3 Response

ng by APR due date.
0

Reporting Block A4 Response

Reporting Block A5 Response
(The number reported in A2a.)
Good Job
No Data

No Data

Grantee Name:	0
PR Number:	0
B. HEP Project Student Participant Information	No Data
Reporting Block, Item B1	Reporting Block B1 Item
B1	Educational and supportive services, and financial support received by HEP HSE enrolled students during the reporting period.
B1.a.	Total HSE instruction hours received by all HEP HSE enrolled students.
B1.b.	Total HSE instruction hours received by HSE attainers.
B1.c.	Instructional Support Services: Please indicate the total number of students receiving the following instructional support services. Students may appear in more than one row if they received more than one service.
B1.c.1.	Tutoring.
B1.c.2.	Counseling or guidance services.
B1.c.3.	Other Educational or Supportive Services, including mentoring or coaching, college transition services, work training services, transportation, child care, and job placement services.
B1.d	Financial support: Please indicate the number of students receiving the following financial supports. Students may appear in more than one row if they received more than one service.
B1.d.1.	Room and board.
B1.d.2.	Stipends.
B1.d.3.	Other financial support
End of Spreadsheet	No Data

No Data
No Data
No Data
Reporting Block B1 Response
No Data
No Data
No Data
No Data

Grantee Name:	0
PR Number:	0
C. HEP Project Services Information	No Data
Reporting Block, Item C1	Reporting Block C1 Item
C1.	Project Model Characteristics during the Reporting Period.
a.	Report the number of commuter students.
b.	Report the number of residential students.
	Your data input accuracy result
c.	Does the project offer in person only, distance/remote, or hybrid distance/remote and in-person participation to students?
d.	Report the number of students who received in-person only instruction and services.
e.	Report the number of students who received distance/remote instruction and services (note: this may or may not include Commuter students. Commuter students may receive any of the three modes of instruction).
f.	Report the number of students who received hybrid distance/remote and in-person instruction and services.
	Your data input accuracy result
g.	In what languages are project services provided?
h.	Is this project in a four-year or two-year educational institution, or in a non-profit organization?
Reporting Block, Item C2	Reporting Block C2 Item
C2.	Project Student Assessment Information Related to this Reporting Period.
a.	Which HSE assessment(s) does your project use?
End of Spreadsheet	No Data

No Data
No Data
No Data
Reporting Block C1 Response
Good Job
Choose one:
Good Job
Choose one:
Choose one:
Reporting Block C2 Response
Choose one:
No Data

Grantee Name:
PR Number:
D. HEP Project Goals and Objectives
Section 1.
Objective 1
Objective 2
Objective 3
Objective 4

Objective 5

Objective 6

Objective 7

Objective 8

Objective 9

Objective 10

Section 2
Question 1
No Data
Question 1.a.
No Data
Question 2
No Data
Question 3
No Data

Question 4
No Data
End of Spreadsheet

Project Performance Objective Information

Provide each project objective listed in the approved application, performance measure target, actual performance outcome, and explain the outcome (maximum 2500 words).

Click the insert a after green box if you need to enter more objectives.

Example:

Objective 1: To provide academic and instructional support for students to successfully attain a high school equivalency (HSE).

Performance Measure: XX% of participants attained their HSE.

Actual Performance Data : XXX Target: XXX

Outcome: HEP exceeded objective 1 with a completion rate of XX%. XXX of the XXX students served during the project year attained HSE. HEP students received educational support throughout the reporting period.

Performance Measure: HEP participants will be computer literate and use computers.

Actual Performance Data: XXX

Outcome: 100% of participants pass a computer literacy test and apply knowledge of computers. All students demonstrated the ability to use computers to complete class assignments.

Objective 2:

Performance Measure:

Outcome:

Performance Measure:

Outcome:

Objective 3:

Performance Measure:

Outcome:

Objective 4:

Performance Measure:

Outcome:

Objective 5:

Performance Measure:

Outcome:

Objective 6:

Performance Measure:

Outcome:

Objective 7:

Performance Measure:

Outcome:

Objective 8:

Performance Measure:

Outcome:

Objective 9:

Performance Measure:

Outcome:

Objective 10:

Performance Measure:

Outcome:

final year Grantees must answer each of the questions below:

Grantees in the final year, attach the final project evaluation that was proposed in the approved grant application. Include the attachment in the APR submission email to the Department.

Is the final project evaluation report attached? [Yes/No]

Page One

When, if applicable, will the project evaluation be available and submitted to the Department?

Using the evaluation results, draw conclusions about the success of the project and/or its impact. Describe any unanticipated outcomes or benefits from the project and any challenges that may have been encountered.

What would you recommend as advice to other educators that are interested in your project? How did the original project ideas change as a result of conducting the project?

pplicable, describe your plans for continuing the project (sustainability; capacity building) and/or disseminating the project results.

No Data

Grantee Name:	0	No Data
PR Number:	0	No Data
E. HEP Project Budget Information (see instructions)	Report section E in the following Table and in the space below:	No Data
No Data	Report in column (a) carryover funds in their correct category amounts from the previous budget period, in column (b) the recommended funds, by budget category, for the current budget period, in column (c), the total revised budget amounts (using your approved, revised budget as in your ED524B Form), and by adding the previous year's carryover in column (a) with the recommended amount in column (b), in each budget category, and in column (d), your project's actual expenditures for this reporting period.	No Data
No Data	Budget Category Numbers	Budget Categories
No Data		
No Data	1	Personnel
No Data	2	Fringe Benefit
No Data	3	Travel
No Data	4	Equipment
No Data	5	Supplies
No Data	6	Contractual
No Data	7	Construction
No Data	8	Other
No Data	9	Total Direct Costs (lines 1-8)
No Data	No Data	Your data input accuracy result
No Data	10	Indirect Costs
No Data		Your data input accuracy result
No Data	11	Training Stipends
No Data	12	Total Amounts (lines 9-11)
No Data	No Data	Your data input accuracy result
No Data	Note: Remember to keep budget line items consistent. For example, if you categorized student textbooks in the Stipend line item in your revised budget, payments for student textbooks must be categorized in the Stipend line item in the Actual Expenditures column.	No Data

1) Provide an explanation if you did not expend funds at the expected rate during the reporting period.

Write Here...

No Data

No Data

F. Additional Information (see instructions)

Note: Do not include requests for budget revisions, supplemental funding or changes to your application's activities in this performance report. See Section F of the APR Instructions for details on the type of information you may provide below.

Write Here...

No Data

No Data

End of Spreadsheet

No Data

No Data

No Data	No Data	No Data	No Data
No Data	No Data	No Data	No Data
No Data	No Data	No Data	No Data
No Data	No Data	No Data	No Data
No Data	No Data	No Data	No Data
Proposed Expenditures - Carryover	Proposed Expenditures - Recommended Amount	Proposed Expenditures - Total Approved, Revised Budget Amount	Actual Expenditures
(a) Carryover from Previous Budget Period	(b) Recommended Amount	(c) Total Approved, Revised Budget Amounts	(d) Actual Expenditure Amounts
		\$0.00	
		\$0.00	
		\$0.00	
		\$0.00	
		\$0.00	
		\$0.00	
		\$0.00	
		\$0.00	
\$0.00	\$0.00	\$0.00	\$0.00
			Good Job
		\$0.00	
			Good Job
		\$0.00	
\$0.00	\$0.00	\$0.00	\$0.00
	Good Job		Good Job
No Data	No Data	No Data	No Data

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