

Sections of Annual Performance Report

Sections	Type	Reporting File
Cover Sheet	Text/Signature	MS Word
Block A	Numerical	MS Excel
Block B	Numerical	MS Excel
Block C	Numerical	MS Excel
Block D	Numerical/Text	MS Excel
Block E	Numerical/Text	MS Excel
Block F	Numerical/Text	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 cc above table summarizes the sections (blocks), the type of files being used, and how they are being submit

The table also clarifies that the **Cover Sheet** is to be submitted as **PDF** since it contains authorized signat **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

Highlighted Color	Interpretation
Blue	Enter Numerical
Green	Enter Text/Error Check Message

No Data
No Data
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No Data

OMB No. 1810-0727 Exp. xx/xx/xxx
 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 1810-0727. Public reporting burden for this collection of information is estimated to average 23 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 (20 U.S.C. 1070d-2). 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 CAMP program, U.S. Department of Education, 400 Maryland Avenue, SW, Washington, D.C. 20202-4651.

No Data
No Data

Submitted As

PDF

MS Excel

MS Excel

MS Excel

MS Excel

MS Excel

MS Excel

Content: text and numerical. The
text.

Features. The **Performance Report**

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No Data

No Data

No Data

No Data

No Data

No Data



Grantee

PR Num

Grant Year:

Reporting Period

No Data

**A. CAMP Project Statistics
and Performance
Reporting**

Reporting Block, Item A1

A1.

A1.a.

A1.b.

A1.b.1.

A1.b.2.

Reporting Block, Item A2

A2.

A2.a.

A2.b.

A2.c.

Reporting Block, Item A3

A3.

A3.a.

Reporting Block, Item A4

A4.

A4.
Reporting Block, Item A5
A5.
A5.a.
A5.b.
Reporting Block, Item A6
A6.
Reporting Block, Item A7
A7.
Reporting Block, Item A8
A8.
A8.a.
A8.b.
A8.c.
Reporting Block, Item A9
Annual Award Amount
Program Performance Measure 1
Program Performance Measure 2
Success efficiency ratio
End of Spreadsheet



Choose from the Drop-Down List

2023-2024

College Assistance Migrant Program U.S. Department of Education Annual Performance Report Data Form

No Data

Reporting Block A1 Item

Number of students served during the reporting period.

Number **funded** to be served.

Number **served** in college courses (note: A1b1 + A1b2 should sum to equal A1b).

Number served who were **new participants** (first academic year in CAMP) (subset of A1b).

Number served who were **returning participants** (not first academic year in CAMP) (subset of A1b).

Reporting Block A2 Item

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

Number of CAMP first academic year **completers**. (**Obj. 1 National Target: 86%**) (**Program Performance Measure 1**)

Number of **withdrawals**.

Number of **persisters** (persisters were enrolled in instructional services in the performance period you are reporting, did not yet complete their first academic year of college, and have reenrolled for instructional services in the subsequent budget period before the APR due date).

Your data input accuracy result

Reporting Block A3 Item

Status of CAMP first year academic year completers from question A2a above at the end of reporting period.

Unduplicated number of CAMP first academic year completers who **continued in postsecondary education programs**. (This amount should not be greater than the amount in A2a above.) (**Obj. 2 National Target: 90%**) (**Program Performance Measure 2**)

Reporting Block A4 Item

Follow-up on CAMP first academic year completers from the reporting period.

Number of CAMP first academic year **completers** during the performance period you are reporting for whom you were able to track for follow-up data.

Reporting Block A5 Item

Number of your former CAMP students who graduated from college with Bachelor's Degree during the performance period you are reporting.

For 2-Year IHEs: Number of your **former** CAMP students who graduated from college with Bachelor's Degree during the performance period you are reporting (only 2-Year IHE projects report in A5a.)

For 4-Year IHEs: Number of your **former** CAMP students who graduated from college with Bachelor's Degree during the performance period you are reporting (only 4-Year IHE projects report in A5b.)

Reporting Block A6 Item

Number of your **former** CAMP students who graduated from college with Associate's Degree during the performance period you are reporting.

Reporting Block A7 Item

Number of your **former** CAMP students who transferred to other IHEs during the performance period you are reporting.

Reporting Block A8 Item

Time to completion for CAMP first academic year completers from question A2a above. (Note: A8a-c should sum to equal the number reported in A2a).

Number of CAMP first academic year completers during the performance period you are reporting who completed their first academic year of college **within one reporting period of your project.**

Number of CAMP first academic year completers during the performance period you are reporting who completed one year of college **after more than one reporting period, but within two reporting periods of your project.**

Number of CAMP first academic year completers during the performance period you are reporting who completed one year of college **after more than two reporting periods of your project.**

Your data input accuracy result

Performance Calculation Table

0.00%

0.00%

\$0

No Data

No Data
No Data
No Data
No Data
No Data
No Data
Reporting Block A1 Response
0
Reporting Block A2 Response
Good Job
Reporting Block A3 Response
Reporting Block A4 Response

Reporting Block A5 Response
Reporting Block A6 Response
Reporting Block A7 Response
Reporting Block A8 Response
Good Job
No Data
No Data
No Data
No Data
No Data
No Data

Grantee Name:	0
PR Number:	0
B. CAMP Project Student Participant Information	No Data
Reporting Block, Item B1	Reporting Block B1 Item
B1	Supportive & instructional Services and Financial Services provided only by CAMP funds and received by CAMP-enrolled students during the reporting period. This count does not include any other services provided to CAMP students by the university or another entity.
B1.a.	Report the number of CAMP students served with the following types of supportive and instructional services. Students may appear in more than one row if they received more than one service. (Do not report hours of services received.)
B1.a.1.	Counseling or guidance services to CAMP students (personal, academic, and career services provided in support of school-life balance and other psychosocial aspects of college completion).
B1.a.2.	Tutoring (additional instructional services provided in support of a specific curriculum, course, or course of study).
B1.a.3.	Other (supportive or instructional services, including health services, assistance with special admissions, or other services as necessary to assist students in completing program requirements).
B1.b.	Report the number of CAMP students receiving the following financial support services. Students may appear in more than one row if they received more than one service.
B1.b.1.	Stipends.
B1.b.2.	Room and Board.
B1.b.3.	Other "Financial Services" (including scholarships, transportation, career-oriented work study, books and supplies, and tuition and fees).
Reporting Block, Item B2	Reporting Block B2 Item
B2	Characteristics of the CAMP enrolled students during this reporting period. (Note: The counts reported in each of Items B2a, B2b, B2c, and B2d cannot exceed the total number of students served (Item A1b) for the reporting period.)
B2.a.	Number of students who were referred from MEP and accepted into CAMP.
B2.b.	Number of students who were referred from HEP and accepted into CAMP.
B2.c.	Number of students who were referred from NFJP and accepted into CAMP.
B2.d.	Number of students who were not referred from HEP, MEP, or NFJP and accepted into CAMP.
End of Spreadsheet	No Data

No Data

No Data

No Data

Reporting Block B1 Response

Reporting Block B2 Response

No Data

Grantee Name:	0
PR Number:	0
C. CAMP Project Services Information	No Data
Reporting Block, Item C1	Reporting Block C1 Item
C1.	Project Model Characteristics during the Reporting Period
C1.a.	Report the number of commuter students.
C1.b.	Report the number of residential students.
	Your data input accuracy result
C1.c.	Does the project offer in person only, distance/remote, or hybrid distance/remote and in-person participation to students?
C1.d.	Report the number of students who received in-person only programming.
C1.e.	Report the number of students who received distance/remote programming.
C1.f.	Report the number of students who received hybrid distance/remote and in-person programming.
	Your data input accuracy result
C1.g.	Is this project in a four-year or two-year educational institution?
C1.h.	Is the project in an institution that uses a semester, quarter, or trimester academic calendar?
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:
No Data

Grantee Name:

PR Number:

D. CAMP 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

0

0

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).

Please insert a row after a green box if you need to enter more objectives.

Example:

Objective 1: To provide academic and instructional support for students to successfully complete the first year of college .

1.1. Performance Measure: XX% of participants successfully complete their first year of college.

Actual Performance Data : XXX Target: XXX

1.1 Outcome: CAMP exceeded objective 1 with a completion rate of XX%. XXX of the XXX students served during the project year successfully passed a minimum of 24 class credits. CAMP students received educational support throughout the academic year.

1.2. Performance Measure: CAMP participants will be computer literate and use computers for at least one course by the completion of their first year.

Target: XXX Actual Performance Data: XXX

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

Objective 2:

3.1. Performance Measure:

3.1. Outcome:

Objective 3:

3.1. Performance Measure:

3.1. Outcome:

Objective 4:

4.1. Performance Measure:

4.1. Outcome:

Objective 5:

5.1. Performance Measure:

5.1. Outcome:

Objective 6:

6.1. Performance Measure:

6.1. Outcome:

Objective 7:

7.1. Performance Measure:

7.1. Outcome:

Objective 8:

8.1. Performance Measure:

8.1. Outcome:

Objective 9:

9.1. Performance Measure:

9.1. Outcome:

Objective 10:

10.1. Performance Measure:

10.1. Outcome:

Only final year grantees must answer each of the questions below.

For 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.

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

Choose One

a.If no, when will the project evaluation be available and submitted to the Department?

2. Utilizing 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 barriers that may have been encountered.

3. 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?

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

No Data

Grantee Name: 0
 PR Number: 0

Report section E in the following Table and in the space below:

E. CAMP Project Budget Information (see instructions)

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

Budget Category Numbers

No Data

No Data

1

No Data

2

No Data

3

No Data

4

No Data

5

No Data

6

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7

No Data

8

No Data

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12

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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.

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

Write Here...

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.

No Data	Write Here...
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

Budget Categories	Proposed Expenditures - Carryover	Proposed Expenditures - Recommended Amount	Proposed Expenditures - Total Approved, Revised Budget Amount
	(a) Carryover from Previous Budget Period	(b) Recommended Amount	(c) Total Approved, Revised Budget Amounts
Personnel			\$0.00
Fringe Benefit			\$0.00
Travel			\$0.00
Equipment			\$0.00
Supplies			\$0.00
Contractual			\$0.00
Construction			\$0.00
Other			\$0.00
Total Direct Costs (lines 1-8)	\$0.00	\$0.00	\$0.00
Your data input accuracy result			
Indirect Costs			\$0.00
Your data input accuracy result			
Training Stipends			\$0.00
Total Amounts (lines 9-11)	\$0.00	\$0.00	\$0.00
Your data input accuracy result		Good Job	

No Data	No Data	No Data	No Data
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**Actual
Expenditures**

(d) Actual
Expenditure
Amounts

\$0.00

Good Job

Good Job

\$0.00

Good Job

No Data

No Data

No Data

No Data

No Data