

# Charter Schools Program (CSP)

Office of Elementary and Secondary Education

U.S. Department of Education

## CSP Data Collection Form

### Instructions

#### **Purpose of Data Collection:**

The new data collection will 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.

This form has two parts. **Part A** asks for confirmation of CSP grant award information. The school/grantee name, contact person, PR/award number and Project Period begin and end dates have 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) the charter school operations information (e.g., start date, 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.

#### **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**.

#### **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-new. Public reporting burden for this collection of information is estimated to average 30 minutes 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 in accordance with the Education Department General Administrative Regulations (EDGAR) 34 CFR 75.253. 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 the Charter Schools Program c/o Nicoisa Jones, 400 Maryland Avenue SW, Washington, DC 20202, [Nicoisa.Jones@ed.gov](mailto:Nicoisa.Jones@ed.gov) directly.

OMB Number: 1810-new Approval Expires

## Data Collection Form

### Part A: CSP Grant Award Information

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

	<u>Grant Award Amount</u>	<u>Supplemental Award Amount (if applicable)</u>
FY 20xx	<b>\$0</b>	<b>\$0</b>

Total Award Amount Obligated: **\$0**

**Comments?** 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](mailto:CSPdatacollection@Wested.org), or call toll-free 866-902-4887.

*Please turn to Part B to provide specific data for your grant*

**OMB Number:**    **Approval Expires**

## Data Collection Form (continued)

### Part B: CSP Grant Award Information

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 full name and contact information for the charter school (and charter developer, if different than the charter school); 2) The total amount of funding an applicant received to start a charter school; 3) the beginning and end date of the grant project period and budget periods; and 4) other charter school information as needed.

#### 1) Charter School Contact Information

##### Charter School Name and Contact Information

Charter school name  
School NCES ID  
School mailing address  
address line 1:  
address line 2:  
city:  
state:  
zipcode:

##### Charter School Management Organization

Management Organization Type  
Management Organization Name  
Management Organization address  
address line 1:  
address line 2:  
city:  
state:  
zipcode:

##### LEA/District Information

LEA name  
LEA NCES ID  
LEA mailing address  
address line 1:  
address line 2:  
city:  
state:  
zipcode:

##### Authorized Public Chartering Agency

Authorizer Type (choose one)  
Authorizer Name  
Authorizer mailing address  
address line 1:  
address line 2:  
city:  
state:  
zipcode:

Does the charter school act as its own LEA?

Is it an LEA with only charter schools?

#### 2) Grant Award and Expenditures Information

Project Period Begin Date 01/01/04  
Project Period End Date 01/01/04  
Total Grant Award Amount Obligated: \$0.00

Please provide the breakdown of funds obligated to this grantee from each Federal Fiscal Year and the amount of funds expended. The total amount obligated across one or more years should equal the Total Grant Award Amount 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 2020				Totals
Dollar amount of grant award	\$				\$0.00
Total amount expended to date	\$				\$0.00
Anticipated expenditures through end of FY	\$				\$0.00
Beginning date of grant budget period	mm/dd/yy				\$0.00
End date of grant budget period	mm/dd/yy				
Type of grant (choose one)					The remainder above is the carryover amount

#### 3) Charter School Operation

School year in which the school first enrolled students

School enrollment  
(if not opened,  
enter "0")

Number of students on  
waitlist to enroll each  
year  
(if not opened,  
enter "NA")

School enrollment and waitlist figures in 20xx

**Comments?** 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.

Thank you very much for your cooperation.

OMB Number: Approval Expires