U.S. DEPARTMENT OF EDUCATION

Washington, D.C. 20202

**GRADUATE ASSISTANCE IN AREAS OF NATIONAL NEED (GAANN) PROGRAM**

**(Title VII, Part A, Higher Education Act of 1965, as amended)**

 **INSTRUCTIONS FOR COMPLETING THE SUPPLEMENT TO THE FINAL PERFORMANCE REPORT**

**DISCLOSURE OF 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 1804-0748.  Public reporting burden for this collection of information is estimated to average 11 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 (Title VII, Part A, Subpart 2, Section 711 of the Higher Education Act of 1965, as amended).  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 GAANN Program, U.S. Department of Education, 400 Maryland Avenue, SW, Washington, D.C. 20202 directly.

**GENERAL INFORMATION**

Reporting Requirements – **Grantees are required to submit a supplement to the final performance report two years after the expiration of their GAANN grant.** The purpose of this supplement is to identify and report the educational and employment outcome of each GAANN fellow. Submission of this report was noted in the Notice Inviting Applications for the competition under which this grant was awarded and is required under the Education Department General Administrative Regulations (EDGAR) volume 75.590, 75.720, and 75.730-732 and under 2 CFR 200.328 (Monitoring and reporting program performance). The information you provide is voluntary, however, you will need to fill in all the fields in order for the performance report to be complete, unless noted otherwise. While your information will not be disclosed outside of the Department, there may be circumstances where information may be shared with a third party, such as a Freedom of Information Act request, court order or subpoena, or if a breach or security incident would occur affecting the system.

Format of performance report – You must complete and submit the report electronically. Prior to submitting the report, you will receive a letter containing the website with instructions for completing the report online.

# DEFINITIONS

Budget Period - A one-year interval of time within a project period, which exists for budget reporting purposes.

Cumulative - From the grant’s first budget period to date.

Project Period - The three-year period of time that is the total length of the GAANN grant.

**Note: Future funding or other benefits may be withheld under this program unless all**

**required reports are completed and filed as mandated under the U.S. Code of Federal Regulations**.

**GAANN PROGRAM**

**SUPPLEMENT TO THE FINAL PERFORMANCE REPORT**

**FISCAL YEAR XXXX - XXXX**

Section I: Grantee Information

**Instructions:** Please complete all information requested in this section.

General Information

Grant Number: P200A

Institution Name:

Department/Program:

Highest degree awarded in the course of study:

○ Master’s Degree

○ Doctorate/Other Postbaccalaureate/Professional Degree

Address:

City, State, Zip Code:

Project Director Name:

Telephone Number:

Fax Number:

Email Address:

Data Entry Person:

(Optional)

Data Entry Phone Number:

Data Entry Email Address:

GAANN Annual Performance Report

Section II: Individual Fellow Data

Instructions: The electronic report will prompt you to complete the information requested in this section. You will be required to enter the requested data into the system for each individual GAANN fellow.

General Information

**1) Fellow’s Name:**

 Last Name First Name

**Status**

**2) What is the fellow’s current education status?** (Check/Select one)

**Master’s Degree programs:**

○ Is enrolled in the designated area of national need

○ Has received a Master’s degree in the designated area of national need

**If fellow has received Master’s or PSM degree, specify month and year of graduation**

**Month \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

○ Left for academic reasons

○ Left for non-academic reasons (personal or other reason)

○ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Doctorate Degree programs:**

○ Is enrolled in the designated area of national need but not yet advanced to Ph.D. candidacy

 ○ Left graduate school after completing a Master’s degree in the designated area of national need

○ Has passed prelims and advanced to Ph.D. candidacy in the designated area of national need

○ Has received a Ph.D. in the designated area of national need

**If fellow has received degree, specify month and year of graduation**

**Month \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

○ Left for academic reasons

○ Left for non-academic reasons (personal or other reason)

○ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3) If the fellow has graduated, what is the fellow’s employment status in the area of their studies within one year of graduation?** (Check/Select one)

 ○ Tenure-track teaching job

 ○ Post-doctoral fellowship

 ○ Private industry

 ○ Working in government agency

 ○ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_