**Project Outcome Assessment Survey Instructions**

**Identifying information** [To be filled out by Federal Staff or its Contractor Designee (ANA Staff)]

Evaluator’s Name: ANA staff enter their full name.

Other ANA Staff/Contractors Present at the Site Visit: List any other ANA staff present at the visit.

Evaluation Region: Select the ANA region the grantee is located.

State: Select the state/territory the grantee is located.

Date of Evaluation: Enter the date the on-site evaluation occurs.

**Grantee Information** [To be filled out by Federal Staff or its Contractor Designee (ANA Staff)]

Grantee Name: Enter the grantee name as listed on the Notice of Grant Award.

Grant Number: Enter the grantee number as listed on the Notice of Grant Award.

Updated Grantee Contact Info: Update Grantee Contact Info if it is not correct in GrantSolutions.

Geo Designation: Enter the geographic designation using information found at United States Department of Agriculture’s Economic Research Service <http://www.ers.usda.gov/data-products/rural-urban-continuum-codes.aspx>

Grant Category: Select the grant category from the drop down menu.

Grant Sub-Category: Select the grant sub-category from the drop down menu.

Original Project Duration: Enter the number of years the project was originally awarded.

Total Federal Funding Amount: Enter the total amount of federal funding including supplements, or de-obligations.

**Grant History** [To be filled out by Federal Staff or its Contractor Designee (ANA Staff)]

Received TA: Indicate whether the grantee received Technical Assistance at any time through the project period. Indicate what the issue was and if there was a resolution.

Received Supplements: Indicate whether the grantee received supplements at any time through the project period and the circumstance.

Received Carryover: Indicate whether the grantee received a budget carry-over at any time through the project period and the circumstance.

Received an LCE: Indicate whether the grantee received a low-cost extension at the end of the project period and the circumstance.

Received an NCE: Indicate whether the grantee received a no-cost extension at the end of the project period and the circumstance.

**Pre-Visit Information** [To be filled out by Federal Staff or its Contractor Designee (ANA Staff)]

Background Information/General Comments: Use this space to note any background information or concerns with the grantee prior to the visit.

DPO Site Visit Information (if applicable): Use this space to note any background information or concerns with the grantee prior to the visit.

**1. Objective Work Plan** [To be filled out by Federal Staff or its Contractor Designee (ANA Staff)]

1.1 Objective: Enter the Objectives from the approved Objective Work Plan from the original application, application revisions or GrantSolutions.

Relevant Years: Check the number of years in the original project period.

Percent Complete: During visit, select the percentage that best correlates to the completion of activities related to the objective.

Outputs/ Outcomes Expected: Enter the results or benefits from the approved Objective Work Plan from the original application, application revisions or GrantSolutions.

Criteria for Evaluating Results and Benefits Expected: Enter the criteria for evaluating the results or benefits from the approved Objective Work Plan from the original application, application revisions or GrantSolutions.

Deliverables (Product): Enter any deliverable or product the grant might intend to produce through the project period.

The remainder of the Project Outcome Assessment Survey Instructions will be completed by federal staff or its Contractor Designee on-site with the grantee as a guided conversation. No further instructions are necessary.