**OPR Instructions**

Detailed instructions on how to complete the OPR are below. Use these instructions when reporting on the status of your activities when responding to the request for information contained in the OPR.

**Item 1:**

Enter legal name of the grantee.

**Item 2:**

Enter the grant number assigned by DHHS/ACF/ANA. This number is found in Item 3 on the Notice of Award (NOA).

**Item 3.a:**

Enter the grantee DUNS number (received from Dun and Bradstreet). This number is found in Item 25 on the NOA.

**Item 3.b:**

Enter the Employer Identification Number (EIN) assigned by the IRS. This number is found in Item 22 on the NOA.

**Item 4:**

Enter grantee name and complete mailing address, including zip code.

**Item 5:**

Select “Yes” if the SF-425 was submitted to the Payment Management System (https://pms.psc.gov/). Select “No” if the SF-425 still needs to be submitted.

**Item 6:**

Enter the *budget* period covered in the report (e.g. Year 1, Year 2, Year 3, Year 4 or Year 5) as applicable.

Enter the *project* start date (month, day, and year)

Enter the *project* end date (month, day, and year)

**Item 7:**

Enter the month, day, and year of the last day covered by the report (e.g. December 31, 20XX, March 31, 20XX, June 30, 20XX, or September 29, 20XX).

**Item 8:**

Indicate the reporting term (e.g. 1st Semi-Annual or 2nd Semi-Annual. Select “other” if the report does not cover a six month period and provide information on the period covered by the report.

**Item 9:**

Enter the title of the ANA project, the name of the individual that prepared the report, the date, their email address and phone number. **Note**: that the performance narrative referenced here starts on page 2.

**Item 10:**

If attachments are being included with the report, list each of the attachments.

**Item 11:**

Self-explanatory.

**Item 12.a:**

Enter the name and title of the authorized representative of the grantee. This individual will be the one certifying the accuracy of the report. **Note**: This cannot be the Principal Investigator (PI)/ Project Director (PD).

**Item 12.b:**

Enter the signature of the authorized representative certifying the report, no other project staff can sign the OPR.

**Item 12.c:**

Enter the telephone number including the area code and extension number of the authorized representative certifying the report.

**Item 12.d:**

Enter the email address of the authorized representative certifying the report.

**Item 12.e:**

Enter the month, day, and year the report is being submitted.

**Item 13:**

Leave blank.

*ONGOING PROJECT PROGRESS*

1. **Objective Work Plan Status/Update**

The approved Objective Work Plan will pre-populate in this section when using GrantSolutions. This has been entered by your ANA Staff and you should not enter anything here.

* Describe how each activity was accomplished: Describe your progress towards fulfilling each of the project’s objectives and activities accomplished during the current reporting period. Grantees should report on activities with the descriptions that are as follows: Specific and include numbers, i.e. of participants or meetings, etc., and dates when possible.
* Quantitative and qualitative data is useful to help ANA understand your project’s progress.
	+ Quantitative: Use numbers such as how many individuals attended a meeting, what percent of a survey reported positive feedback, for example
	+ Qualitative Tips: Describe who completed what, when, where, why, and how for all activity descriptions.
		- **Poor description:** 3 people attended the Board meeting
		- **Good description:** The Project Director, Project Coordinator and Project Assistant attended the Board Meeting on 5/10/20 and we presented on the new cultural enrichment curricula that we are developing for high school students, which includes exploring one’s Native identity, language, tribal history, and ancestral traditions. In this highly interactive curricula, we provide activities that give students an opportunity to deeply reflect on each topic and share their reflections with one another. The Board was very impressed with our presentation and will be reviewing the curricula and providing feedback by 5/30/20.
* Think of the description like telling a story, where you need to include all of the background information and details so that the reader can get a clear picture of what the activity looks like.
* Demonstrate how much progress has been made on the activity to date. If the activity has been delayed, identify the causes and what, if any, steps are being taken to address the challenge. It is just as important to explain why an activity is delayed and what alternate approaches you have taken to complete the activity as it is to explain your progress.
* The information on activities is cumulative for each year of the project and should be maintained for the duration of the project period (i.e. do not delete information from previous reporting periods for the current budget period). Should you need to update the status of an activity, please place “UPDATE:” prior to providing the updates.

Status of Actives: Identify the status of each activity. This column should be updated accordingly. From the drop-down menu, select the correct status:

* + Activities can only be marked as ongoing in semi-annual reports (reports that cover the first six months of the budget period)
* If you are doing your annual report, which is the second report of the budget period (project year), activities CANNOT be marked as ongoing.    “N/A” if the activity is not scheduled to start until later in the project period. Do not use N/A if the activity is delayed.
* “Delayed” if the activity was not completed based on the originally anticipated end date and is still expected to be achieved. If the activity is delayed, enter the expected day, month, and year that the activity is expected to be completed.
	+ **Please be sure that you select delayed for any activities that are not fully complete.** If you mark activities as complete when they are in fact delayed, you will not be able to carry over funds connected to those activities to the next budget period. This can hurt your project as you will not be able to use your unspent funds to finish your activities in the following year.
* “Completed” if the activity was completed based on originally anticipated “end date”. Once marked completed, an expected completion date should not be provided

**B. Staffing and Human Resources**

**Item 1:** Select “yes” if your Project Director or Authorized Representative changed this reporting period. Select “no” if they have not.

**Item 2:** Select “yes” if there are positions that are vacant or were vacant as of 30 days prior to the end of this reporting period. Also, indicate reasons for vacancies and actions taken or to be taken to fill vacant positions.

**Item 3:** If “yes” is selected, list the affected positions, explain the reason for the change, how long the position had been open and if the position has been filled. Please be as detailed as possible when explaining reasons for staffing changes.

**Item 4: Employment Tables**

Note: A job is classified as being currently filled and required for this project to be completed. There are two tables. The first table is for positions filled as a requirement of the project. This accounts for jobs that are located in the project’s line item budget for example. The second table is for jobs that were obtained as a result of project objective and activities.

Complete the first table as follows:

* Position Title –enter the position title for each person working on the project**.**
* Position Type –enter the type of position Full time, Part time Intern, Stipend, Consultant/Freelance, other). This will be a drop down menu.
* Position Funding – enter the type of funding that pays for this position. This will be a drop down menu of Federal, non-federal share (NFS), or both if the position is funded by both sources.
* Name of Individual – enter the name of the individual filling the position
* Filled by – check all that apply, Native, Veteran or Female.
* Date Job Filled –enter the date the job was filled.
* Avg. # Hours per Week - enter the average # of hours per week by the position.
* Date Job Ended –enter the date the job ended, if applicable.
* Did position exist before the project?–check “yes” or “no” if the position had existed before the project started.
* Will position continue after the project ends?–enter if the position will continue after the project ends (only for final reporting period).

Complete the second table as follows:

* Name of Individual – enter the name of the individual filling the position
* Position Title – enter the position title for each person working on the project**.**
* Position Type –enter the type of position Full time, Part time Intern, Stipend, Consultant/Freelance, other)). This will be a drop down menu.
* Industry – select the type of industry that closest matches the position obtained.
* Filled by – check all that apply, Native, Veteran or Female.
* Date Job Filled –enter the date the job was filled.
* Avg. # Hours per Week - enter the average # of hours per week by the position.
* Salary – List the person’s salary, if known.
* Date Job Ended –enter the date the job ended, if applicable.
* Did position exist before the project?–check “yes” or “no” if the position had existed before the project started.
* Will position continue after the project ends?–enter if the position will continue after the project end (only for final reporting period).
* Check the box, if the position is currently vacant.

**C:** **Challenges:**

Challenges are any issues or events which have negatively impacted the implementation of your project. Challenges occur for nearly every project and can be overcome through careful planning and monitoring. In some cases, technical assistance can be provided to assist grantees in overcoming challenges. Note: Reporting on challenges does not in any way reflect negatively on grantees, as all projects encounter difficulties. ANA encourages and appreciates detailed feedback on the challenges that grantees experience and how grantees approach such challenges.

**Item 1:** Select “yes” if your project encountered any challenges during the reporting period. Select “no” if you encountered no challenges.

**Item 2:** If you select “yes”, please provide a description of each challenge in the first column in the table below. In the second column, select “yes” if you have overcome the challenge and select “no” if you are still encountering this challenge. In the third column, describe how you overcame the challenge, if you selected “yes” or identify your plan to address the challenge, if you selected “no”. Please be as detailed as possible, as the more information ANA receives on grantee challenges, the better we can assist grantees in the future.

**D. Financial**

**Item 1**: Select “yes” if the grantee had trouble accessing (drawing down) funds from the Division of Payment Management (DPM**)** during the reporting period.Select “no” if not.

**Item 2:** If “Yes” is selected, explain the problem and if it was resolved.

**Item 3:** If your project generated program income, identify how your program income will be used to support the project**.**

**E. Other:**
Include any additional information your organization would like to share with ANA regarding your project.

**F. Indicators**

Item 1: Fill out the actual change during this reporting period that has occurred on the Impact Indicator as listed from your original application.

**G. Native Youth and Elder Engagement**

ANA is interested in intergenerational activities as a way project participants may pass down traditional culture, language and knowledge down to the next generation. Please use this section to document any intergenerational activities that may have occurred in your project.

Item 1: Select “yes” if the project provided any activities involving Native Youth or and Elders during this reporting period. Select “no” if there were no activities involving Native youth or and Elders during this reporting period. Select “not applicable” if you did not intend to have Native youth or Elder activities as a part of your project.

Item 1a: If “yes” is selected, list the title and a brief description of the activity. Also indicate the total number of youth participating, the total number of new youth participating, total number of Elders participating and total number of new Elders participating in the activities listed.

Item 2: Select “yes” if any of the activities involving Elders and/or youth promoted cultural preservation during this reporting period. Select “no” if not.

Item 2a: If “yes” is selected, please provide a description of how the activities promoted cultural preservation during this reporting period.

Item 3: Select “yes” if the project engaged in youth leadership or leadership development during this reporting period. Select “no” if not.

Item 3a: If “yes” is selected, please provide a description of how the activities promoted youth leadership or leadership development during this reporting period.

**H. Project Development**

List the name of the writer(s) of the grant application, with their title. Indicate if they are program staff or not, consultant to the project, Native American, and/or tribal member. Only applicable to Year 1.

**I. Partnerships**

Item 1: Enter any partnerships formed during this reporting period. Select whether they are New from the start date of the project; or if they are Pre-existing from before the start date of the project. Select the type of partner from the drop-down menu and indicate the resources the partner(s) contributed to the project. Lastly, update the number of partners since the beginning of the project.

**J. Community Involvement and Participation in the Project**

Item 1: Select “yes” if there were any volunteers were utilized in the implementation of the project. Select “no” if not.

Item 1a: If “yes” is selected in Item 1, please indicate the number of unduplicated volunteers who contributed to the project. Update this number each reporting period so that by project’s end all unduplicated volunteers are reflected.

Item 1b: If “yes” is selected in Item 1, please indicate the contribution that the volunteers made to the project.

Item 1c: Indicate how many hours the volunteers contributed to the project during this reporting period. Update this number each reporting period so that by project’s end any unduplicated volunteers are reflected.

Item 1d: Select “yes” if you count volunteer hours towards your non-federal share.

Item 2: If community participation is an intended part of the project, select “yes” if the estimated level of actual community participation compared with desired participation. And if not, indicate the reason why. Select “not applicable” if there was no active community participation intended for the project.

**K. Project Benefits**

Item 1: Indicate what changed in the service community as a result of the project. Please list both intended and unintended changes, either positive or negative.

Item 2: Select “yes” if the project supported Native owned businesses such as purchasing products, contracting services, etc. Select “no” if not.

Item 2a: If “yes”, indicate how many businesses

Item 2 b: Indicate which are the top three businesses supported by dollar amount.

Item 3: Select “yes” if any businesses were created due to the project. Select “no” if not.

Item 3a: If “yes” is selected, indicate how many businesses were created.

Item 3b: If “yes” was selected, identify what type(s) of businesses were created.

Item 4: Select “yes” if any businesses were expanded.

Item 4a: If “yes” is selected, explain how they were expanded.

Item 5: Select “yes” if any members of your community, including project staff, completed training sponsored or arranged by the project in order to learn a new skill, gain knowledge, developed expertise, earned a credential, or otherwise obtained beneficial experience during this reporting period. Select “no” if not.

Item 5a: If “yes” is selected, indicate the name of the training or workshop, a description of skills or knowledge developed, number of people who completed the training, number of those who completed the training were project staff, number of new people who completed the training and total number of hours to complete the trainings.

Item 6: Select “yes” if any ordinances, codes, regulations, or other governmental documents developed during this reporting period. Select “no” if not.

Item 6a: If “yes” is selected, indicate the type of ordnance, code or regulation developed from the drop-down menu), give a brief description of the ordnance, code or regulation, indicate whether the ordnance, code or regulation was passed, and indicate if the ordnance, code or regulation was implemented. If implemented, briefly explain how it was implemented.

Item 7: Select “yes” if any materials or resources were created during this reporting period. Select “no” if not.

Item 7a: If “yes” is selected, list the material or resource created. Select the type of resource from the drop-down menu. Indicate if this was electronic or technology based and give a brief explanation on how the material or resource supported the project’s goals.

Item 8: Select “yes” if the project has a plan in place to secure post-project funding to continue or extend project benefits. Select “no” if not.

Item 8a: If “no” is selected, please indicate whether the project would like ANA’s assistance in establishing a sustainability plan.

Item 9: Describe any collaboration with partners, including federal, tribal, or state partnership to continue or extend project outcomes, services, and activities in order to achieve your community’s desired long-term goals after this ANA project ends. Select “not applicable” if partnerships are not needed to continue the long-term goals after this ANA project ends.

**L. Lessons Learned and Additional Support**

Item 1: Describe any lessons learned, promising practices, innovations, etc. you think could help similar projects overcome or resolve obstacles for other projects.

Item 2: Describe any additional support or resources that ANA could provide or arrange to help your project overcome or resolve obstacles you have encountered in the reporting period.

**M. PROJECT SPECIFIC**

LANGUAGE PROJECTS ONLY

Item 1: Identify the language or language family addressed by your project.

Item 2: Select the options that best complete the sentence “My language project uses ANA grant funds to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.” Select any that apply and only update if there are any changes from the previous reporting period. If “other” is selected, describe how the project will best use its funds to accomplish the stated goals.

Item 3: Select “yes” if any language surveys or assessments developed. Select “no” if not. If “yes” is selected, provide blank copies with the ADR submission for this reporting period.

Item 3a: If “yes” is selected in Item 3, indicate how many different surveys or assessments were developed.

Item 3b: If “yes” is selected in Item 3, indicate how many different surveys or assessments were distributed and how many returned.

Item 3c: If “yes” is selected in Item 3, describe the overall purpose of any surveys or assessments.

Item 4: Select “yes” if any language classes conducted during this reporting period. Select “no” if not.

Item 4a: If “yes” is selected, select the proficiency level from the drop-down menu. Indicate the total number of classes, total number of class hours, and total number of students. Select whether the classes were immersion. Indicate the average of the students.

Item 4b: If the average age of language learners was between 0-6 years of age, select “yes” if the project has an on-going relationship with one or more Head Start or Early Head Start programs. Select “no” if not. Select “not applicable” if the project does not serve children ages 0-6 years of age.

Item 5: If instruction is part of your language project, describe any methods, materials, and strategies used, during the reporting period, to measure progress in language proficiency or fluency.

Item 6: If applicable, indicate how many new youth increased their ability to speak a Native language (language proficiency) during this reporting period. Update this number each reporting period so that by project’s end any unduplicated youth who increased proficiency are reflected.

Item 7: If applicable, indicate how many new adults increased their ability to speak a Native language (language proficiency) during this reporting period. Update this number each reporting period so that by project’s end any unduplicated adults who increased proficiency are reflected.

Item 8: If applicable, select “yes” if any youth achieved fluency in a Native language. If “yes” is selected, indicate how many. Update this number each reporting period so that by project’s end any unduplicated youth who achieved fluency in a Native language are reflected. Select “no” if not applicable, or none achieved fluency.

Item 9: If applicable, select “yes” if any adults achieved fluency in a Native language. If “yes” is selected, indicate how many. Update this number each reporting period so that by project’s end any unduplicated adults who achieved fluency in a Native language are reflected. Select “no” if not applicable, or none achieved fluency.

Item 10: If applicable, select “yes” if any language teachers were trained during this reporting period. Select “no” if not applicable, or no teachers were trained.

Item 10a: If “yes” is selected, indicate how many of these teachers received training in language instruction. Update this number each reporting period so that by project’s end any unduplicated teachers trained are reflected.

Item 10b: Indicate the type of training that these teachers received related to language instruction. Select both if applicable.

Item 10c: Indicate the number of teachers who received training in an area other than instruction. Describe the trainings received.

Item 10d: Select “yes” if any of the teachers received a certification or credential as a result of training. Select “no” if not.

Item 10e: If “yes” was selected in Item 12d, indicate which organization issued the certification or credential.

Item 10f: If “yes” was selected in Item 12d, indicate the number of teachers who received a certification or credential.

ESTHER MARTINEZ IMMERSION (EMI) PROJECTS ONLY

Item 1: Select whether this project serves a Language Nest, Survival School or is a Restoration Program.

Item 2: Describe what, if any, obstacles or delays in meeting the requirements for the specific EMI language project. Select “not applicable” if there were no obstacles or delays.

ENVIRONMENTAL REGULATORY ENHANCEMENT (ERE) PROJECTS ONLY

Item 1: Select “yes” if the project collected environmental baseline data. Select “no” if not.

Item 1a: If “yes” is selected, describe what was learned from the data and how it will be used.

Item 2: Select “yes” if the project collected data to monitor environmental conditions. Select “no” if not.

Item 2a: If “yes” is selected, briefly describe what was learned from the data and how it will be used.

Item 3: If applicable, briefly describe how project resulted in increased capacity for the Tribe to manage its physical resources and/or the environmental quality on tribal lands during this reporting period.

Item 4: Select “yes” if there were any improvement in the environmental quality on tribal lands as a result of this project. Select “no” if not. Select “not applicable” if actual improvement in environmental quality is not a part of this project. Select “to be determined” if the improvement in environmental quality is part of a later phase of the project.

Item 4a: If “yes” describe the improvements in the environmental quality as a result of the project.

**End-of-Project Addendum –BENEFITS, RESULTS, AND**

**OUTCOMES** - This section should be completed only in the final reporting period of the project and reflect the entire project period.

 **A. Beneficiaries**

Identify any individuals or groups of individuals who benefited as a direct result of this project. In order to protect privacy of individuals, it is acceptable to use only the first name. Select the beneficiary type from the drop-down menu. Describe in as much detail as possible the positive change that occurred as a direct result of this project overall.

1. **Objective Work Plan**

Describe the overall progress and results and benefits that were accomplished per Objective by the end of the project.

1. **Problem Statement and Project Goal**

Item 1: Describe the extent to which the overall goal of the project was achieved at the end of the project period.

Item 2: Describe the extent to which the condition identified or environment described in the problem statement was addressed by the end of the project period.

**D. Community and External Data**

Item 1: Describe any changes in your organization/community as a direct result of this project.

Item 2: Indicate any information, feedback, observation(s), input, or other data collected from your community.

Item 3: If applicable, describe information, feedback, observation(s), input, or other data from ANA, other federal agencies, or others influenced project benefits, results, and outcomes.

**E. Continuation/sustainability of Project Goals, Results, and Efforts**

Item 1: Describe any promising practices from your project.

Item 2: If you could do this project over again, describe in as much detail what you would do differently, if applicable.

Item 3: Select “yes” if your project disseminated your project’s accomplishments and successes, internally and externally. Select “no” if not.

Item 3a: If “yes” is selected, describe how your project disseminated your project’s accomplishments and successes, internally and externally.

Item 4: Describe in as much detail as possible what outcomes, services, and activities you want to continue or extend after the project has ended, including any new activities intended to achieve your community’s desired long-term goals.

Item 5: Indicate how the project intends to financially continue or extend desired project outcomes, services, and activities after this ANA-funded project ends. Check all that apply.

Item 6: Indicate what level of funding does the project currently have in place to continue or extend project benefits beyond the project period. If either “Some, but not all needed funding has been secured to continue or extend project benefits” or “Still seeking needed funding, none currently in place” is selected, describe any plans or efforts being made to secure additional resources to sustain desired project outcomes, services, and activities.

Item 7: Select what level of funding and/or source(s) the project has to continue project activities after the project ends.

Item 8: Indicate if your project is interested in ANA’s project planning and development training, ANA’s pre-application training or roundtables to further support your organization in the future.