

Appendix F
Project Cost Worksheet

OMB Number:
Expiration Date:

Pathways to Partnerships

Cost Worksheet

February 5, 2025

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 1820_NEW. Public reporting burden for this collection of information is estimated to average 3 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 voluntary. 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 Diandrea Bailey, PhD, U.S. Department of Education, Office of Special Education and Rehabilitative Services, Rehabilitation Services Administration, 400 Maryland Avenue SW, Washington, DC 20202 directly.

Guidance for completing this worksheet

As part of the National Evaluation of the Pathways to Partnerships Program, Mathematica is examining how grant funding was spent on specific project activities. To do so, we are collecting information on annual expenditures from the start of the project through Project Year 3 (October 2023 to September 2026), along with expenditures for specific activities during Project Year 3 (October 2025 – September 2026) and estimates of the number of children, youth, and youth service professionals who engaged in project services during Project Year 3. We will use the information you provide to estimate the average costs of providing services, resources, and training to participants. This information could be helpful to your state and other states if they consider future investments in similar activities.

What information do I need to complete this worksheet? You will need information about the expenditures for personnel, time, materials, and other resources you and your colleagues made to implement your Pathways to Partnership project.

Who should complete the worksheet? A person familiar with your project and its accounting records should be the main person to complete the worksheet. This person can consult with other people to gather information to address some questions.

What if a question doesn't apply or a pre-filled expense is incorrect? Please complete the worksheet to the best of your ability and let us know anything that was not applicable or incorrect in the comment box at the end of the worksheet.

What do I do after I complete the worksheet? Please complete the worksheet by [DEADLINE]. After you submit it, a Mathematica team member will review the information and may follow up with you to clarify details if necessary.

How will you keep my information private and secure? The personally identifiable information (PII) requested on this form is collected as authorized by the Consolidated Appropriations Act, 2022, P.L. 117-103 Rehabilitation Services, March 15, 2022. The researchers conducting this study follow the confidentiality and data protection requirements, as required by law. All your responses will be kept private and used only for research purposes. Your responses will be combined with the responses of other respondents and no individual names will be reported. While there are no direct benefits to participants and participation is voluntary, your participation will help us learn how states can better provide services to youth with disabilities. 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 orders or subpoena, or if a breach or security incident affects the data management system.

What should I do if I have any other questions? Please contact the Mathematica study team at XXX-XXX-XXXX or FFY23DIF@mathematica-mpr.com.

[RESPONDENT CLICKS "NEXT" TO ADVANCE TO NEXT PAGE OF WORKSHEET]

1. Contact information

Please provide contact information for the person we should reach out to with follow-up questions.

Contact information	
Name	
Title	
Email	
Phone	

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2. Start-up spending in Project Years 1, 2, and 3

Please provide the percentage of your total expenditures (including expenditures of grant funding and matched/in-kind/cost share funding) that your project spent on start-up activities in each of Project Years 1, 2, and 3. Start-up activities may include, for example, developing project services and resources, hiring staff, and capital investments necessary to implement programming. For reference, your project’s total expenditures for each year as reported on form ED-524B are shown below.

Your responses are only for purposes of the National Evaluation and will not be reported to the Rehabilitation Services Administration individually. Your best estimate is fine.

Project Year	For reference only: Total expenditures as reported on form ED-524B	Percentage of annual expenditures used for start-up activities
Year 1 (October 2023 – September 2024)	[FILL]	___%
Year 2 (October 2024 – September 2025)	[FILL]	___%
Year 3 (October 2025 – September 2026)	[FILL]	___%

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3. Number of children and youth who used project services in Project Year 3

In the first column below, please review the cumulative number of children and youth who ever used project services in Project Years 1-3 as reported in your project’s November 2026 end-of-year report. This number represents all unique service users, meaning that those who used services in multiple years are counted only once.

In the second column, please indicate the number of children and youth who used services during Project Year 3 (October 2025 – September 2026), regardless of when they started receiving project services.

Number of children and youth who <u>ever</u> used project services during Project Years 1 – 3	Number of children and youth who used project services during Project Year 3, regardless of when they started receiving services
[FILL]	—

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4. Number of youth service professionals who received project training in Project Year 3

In the first column below, please review the total number of youth service professionals who completed project training in Project Years 1-3 as reported in your project’s November 2026 end-of-year report. This number represents all unique training participants, meaning that those who received training in multiple years are counted only once.

In the second column, please indicate the number of youth service professionals who received training during Project Year 3 (October 2025 – September 2026), even if they also received training in earlier project years.

Number of youth service professionals who <u>ever</u> received project training during Project Years 1 – 3	Number of youth service professionals who received training during Project Year 3
[FILL]	—

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5. Allocation of resources in Project Year 3

Please indicate how your project allocated resources to the specific activities listed below during Project Year 3 (October 2025 – September 2026). For each activity, please indicate what proportion of your Project Year 3 funding was spent on the activity. Your best estimate for each row is fine, but the total should add to 100%.

Activity	Percentage of Project Year 3 Expenditures
Activities involving children and youth	____%
These might include:	
• Outreach to children, youth, and parents • Developing resources or tools for children, youth, and parents • Developing and delivering training or services to children, youth, and parents • Collaborating with partners to conduct the above activities	
Activities involving youth service professionals	____%
These might include:	
• Outreach to youth service professionals • Developing resources or tools for youth service professionals • Developing and delivering training or services to youth service professionals • Collaborating with partners to conduct the above activities	
General or administrative activities	____%
These might include:	
• Resource mapping to identify relevant existing programs, services, and resources • Project website programming and maintenance • Project management and administration • Collaborating with partners to conduct the above activities	
Evaluation activities	____%
These might include:	
• Designing the evaluation • Collecting and analyzing data • Reporting and disseminating findings • Collaborating with partners to conduct the above activities	
Other activities (optional)	____%
If your project had expenses that do not fit into any of the categories above, please briefly describe them here and note the percentage of Project 3 expenditures they comprised.	
Total	100%

6. Additional details or comments (optional)

Please provide any details about how your project tracks or categorizes expenses that are not captured above, or that you believe provide necessary context to what you reported above.

**Thank you for completing the National Evaluation of the Pathways to Partnerships
Program cost worksheet.**