

NPS Youth Partner Portal Bulk Upload Spreadsheet Instructions

This spreadsheet is organized in 4 worksheets to collect all information necessary to bulk import your participant project data into the Youth Partner Portal.

Partner Master	This sheet should contain one row for the partner specific information that needs to be added or updated.
Participant Master	Please populate this sheet with a list of ALL participants that perform work on NPS locations for you as a partner organization
Project Master	Please populate this sheet with a list of ALL projects that are performed at NPS locations by you as a partner organization
Project Participant	Please populate this sheet with the Partner Participant IDs, as well as Partner Project IDs and the relevant hours and other information. Participant ID and Project ID entered here MUST be present on the Participant Master sheet and the Project Master sheet respectively.

All required columns are marked with *

Leave all the NPS ID columns empty

You MUST provide Partner ID columns to correctly identify participants and projects during bulk upload

Paperwork Reduction Act Notice

information.

This is a Privacy Act System of Records

Access to this information is limited to only those who have a need for the information in the performance of official duties. Disclosure without the consent of the subject of the information is restricted unless required by the Freedom of Information Act, or as permitted under the Privacy Act and outlined in 43 C.F.R. 2.231 or as a result in the DOI-05, Interior Volunteer Services File System, DOI-58 Employee Administrative Records, OPM/GOV General Personnel Records, or OPM/GOVT-5 Recruiting, Examining and Placement Records system of records.

These records may not be altered or destroyed except as authorized by 43 C.F.R. 2.227.

Privacy Act Statement

Please contact your bureau or office Privacy Officer for guidance on disclosure restrictions.

CRIMINAL PENALTIES FOR DISCLOSURE: The Privacy Act contains provisions for criminal penalties for knowingly and/or willfully disclosing information from this system unless properly authorized.

Cybersecurity Best Practices

Routinely update your computers operating system, web browser, and security software to remain current with software updates (e.g. anti-virus & anti-malware).

DOI is an equal opportunity provider, employer, and lender.

Participant and

DOI-XXX-XXX (exp. XX/XX/XXXX)

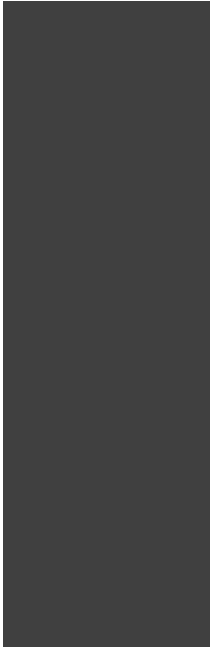
OMB-0596-0247 (Exp. XX/XX/XXXX)

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with

NPS Partner ID *Partner Assigned ID *Partner Name Partner Status *Master Agreement No.



Address 1	Address 2	City	State	ZipCode	Contact 1 FirstName
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Contact 1 LastName Contact 1 Middle Initial Contact 1 Phone Contact 1 Fax *Contact 1 E-mail

Contact 2 FContact 2 Contact 2 MidContact 2 Phone Contact 2 Fax Contact 2 E-mail

Services Provided

Remarks

Cultural Resources
Cultural Resources
Facility Management

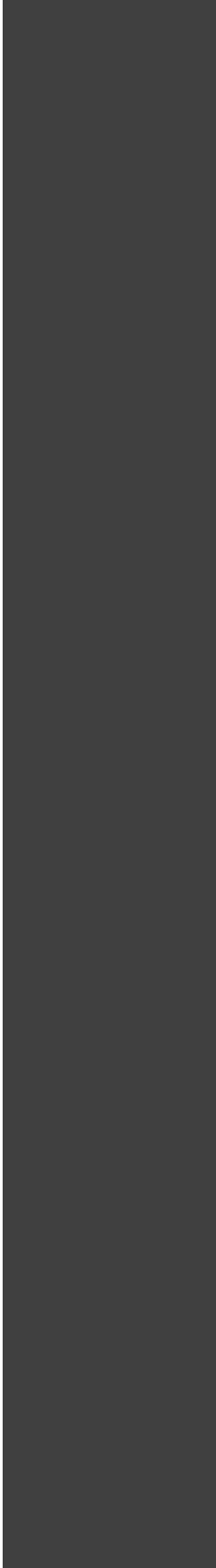
Science/N&Cultural Resources

Science/N&Cultural Resources
Cultural R Recreation
Cultural R Recreation

Cultural Resources

Cultural R Recreation

NPS Participant ID *Partner Participant ID *First Name *Last Name Middle Initial *Phone



***Permanent Residence ZipCode *Email**

***Month & Year of BirthAge**

*Acknowledgment of Parent: *Sex

*Race and Ethnicity 1

Race and Ethnicity 2

Race and Ethnicity 3

Race and Ethnicity 4

Race and Ethnicity 5

Race and Ethnicity 6

Race and Ethnicity 7

***Education Level Completed 1**

Post-secondary Institution Name - 1 Post-secondary Institution Name - 2 Course of Study - 1

Course of Study - 2 *Military/Veteran Status Disability Status AmeriCorps Status

Career goals

Skills, Certifications, Competencies

NPS Project ID *Partner Project ID *Legal Applicant or Cooperator SAM UEI Number

***Project Name**

***Description**

***Project Point of Contact Last Name *Project Point of Contact First Name**

***Project Point of Contact Email Address *Agency Office or Park**

***Task Agreement Number *Type of Project**

***Maintenance type *Location**

***Fiscal Year**

***Legal Hire Authority**

***Start Date *End Date Remarks**

Secondary Partner Name (If any)

Project Participant

NPS Project ID NPS Participar * Partner Proje * Partner Parti * Number of H * Hiring Certifi * Hours Eligibl

Project Participant

*Certificate StCertificate da Hiring Certifi *Position TypeNarrative/Comments