Project Information

Review and edit the project information and contact information for the project director. To change the name or email of your project director, contact your program officer for assistance.

* Required fields	
Name:	
Title:	
Street:	*
Street 2:	
City:	*
State:	Select one
Postal code:	*
Phone:	*
Fax:	
Email: Web address:	
Home institution: Project title:	*
World area: Program officer:	0
	These items are populated from your fellows' information.
	■ Languages *
	Countries *
	■ Disciplines *
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	Save and Continue

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First Name *	Last Name *	Title	Phone	Email *
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Enter the Travel Approv			-	nded particir	oant travel	ing either	to or from the	U.S. or in-	-country
* Required fields			Tron odon gram ran	idod partioip		9 00.		0.0.0	
Group or individual: 0 (_	roup jn Individual is more than one parti		ate in the "P	urpose of tra	avel explanation.	")	
Participant name(s): (limit 500 characters)		*	·						<u></u>
Travel to or from U.S.:		* jn To	jn From U.S.						
Fulbright-Hays GPA ful	nds used for travel:	4	-Country € Inte	rnational					
Purpose of travel:		* Selec	ct one		V				
Purpose of travel expla (Provide a brief explanation scope of the work. Indicate	of the purpose of trave	. If the purp			program acti	ivities. Provid	de a justification	for the travel	I relating it to the
Country(ies):		* (For trav	vel to the U.S., select the	he country the	participant i	is traveling f	rom.)		_ _
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Fulbright-Hays GPA ful	nds to be expended	: * \$							
Explanation of Fulbrigh (Provide a detailed itemized	-				ng, per diem,	, travel. Clea	ırly explain all ex	penditures.)	
									-
Departure date:		*	(mm/do	d/yyyy)					
Return date:		*	(mm/de						
Comments: (limit 1,000 c	haracters)	J	(11111/00	11111					

Participant's Departure Itinerary (Required for international travel)

Departure Date (mm/dd/yyyy)		Arrival Date (mm/dd/yyyy)	To City		Airline and Flight Number
				<u></u>	

Participant's Return Itinerary

Departure Date (mm/dd/yyyy)	From City	Arrival Date (mm/dd/yyyy)	To City	To State or Country	Airline and Flight Number

Submit to IEPS Save and Add Another TAR Save and Return to List

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Add a Participant

Enter the following information about each participant, including project administrators.

* Required fields		
Participant name:	*	
		First name Last name
Email:	*	
Position title:	*	
Institution or Employer:	*	Select one
Other: (If institution not in dropdown)		
Street address:	*	
City:	*	
State:		Select one
Country:	*	Select one
Postal code:		
Participant type:	*	Select one
Specialty:	*	Select one 🔻
Has the individual previously participted in	a	Fulbright-Hays Seminars or Group Projects Abroad project? *
		jn Yes jn No
If so, for what year(s) and country(ies)?		
Save and	Ne	ew Entry Save and Return to List

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Pre-Departure Preparation and Orientation Evaluation

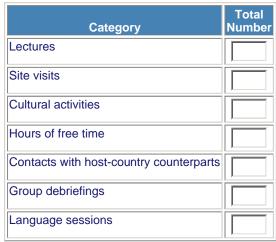
Evaluate the pre-departure orientation. Describe any exemplary activities and note areas for improvement. Include the following categories, if applicable:

- Language instruction;
- Delivery of the information in the orientation, including pacing and appropriateness;
- · Cultural sensitivity of program coordinators;
- · Adequacy of preparation to make participants feel comfortable and ready to travel; and
- Overall preparation for the orientation.

* Required fields

Exemplary activities: * (limit 4,000 characters and spaces)	
Areas for improvement: * (limit 4,000 characters and spaces)	
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In-Country	, Λcti	vitios							





In-Country Experience Evaluation

Evaluate the in-country experience. Describe any exemplary activities and note areas for improvement. Include the following categories, if applicable:

- · Condition of housing facilities;
- Quality of food and dining services;
- · Condition of meeting facilities;
- Quality of host country faculty and teachers;
- · Quality of other host country counterparts;
- Quality and value of interaction with other program participants;
- Quality of service provided by host country administering agencies;
- Time scheduling and itinerary;
- · Pacing of itinerary; and
- Ability to meet the special needs of participants.

	_					
*	к	eal	ure	b:	Fie	lds

Exemplary activities: * (limit 4,000 characters and spaces)	
Areas for improvement: * (limit 4,000 characters and spaces)	
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Post-Seminar Orientation	Evaluation	In-Country Activ	vities Ex	In-Country operience Eval	Sources	of Funding	Outreach Activitie	es Budget
Sources of Fun	ding							
Provide the following info * Required fields	rmation abou	t the funding sup	port for the	project. Totals w	vill be autor	matically calc	ulated.	
Was the Fulbright-Hays C	SPA funding a	dequate to comp	lete the pro	ject as planned	? [*] j̇́n Yes	jn No		
Did the project receive fe Total amount of other fed		in addition to the	Fulbright-H	lays GPA grant?	* jm Yes	jn No		
Source of other federal fu	ınding:		Ψ					
Non-Federal Funding								
Did the project receive non-federal funding? * jn Yes jn No								
Participant cost-sharing per person:								
Total participant cost-sharing:								
School district cost-sharing:			\$					
Institution cost-sharing:			\$					
Non-profit organization(s)	cost-sharing	:	\$					
Total non-federal funding	:		\$					
Total amount of all other	federal and no	on-federal funding	g: \$					
	Sav	e S	ave and Coı	ntinue				

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Outreach Activities

Enter information for each outreach activity you completed or planned as a result of your participation in the program. Include activities such as conference presentations, teacher workshops, media interviews and articles.

* Required fields

Type of activity:	*	Select one
Title of activity:	*	
Target audience:	*	Select all that apply Business Business executives Community organization (for multiple selections, hold down the "ctrl" or "apple" key and click)
State:		Select one
Country:	*	Select one
Is this a completed	or	planned activity? * jn Completed jn Planned
Total attendance:		
Comments: (limit 1,0	000	characters and spaces)
		Save and New Entry Save and Return to List

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Post-Seminar Screens	rientation Evaluation	In-Country Activities	In-Country Experience Eval	Sources of Funding	Outreach Activities	Budget

Budget

For each category, enter the amount of Fulbright-Hays GPA funds expended during the grant period. Totals will be automatically calculated.

* Required fields

Budget Category	Fulbright-Hays GPA Funds Spent in the Current Reporting Period		
Personnel	\$ 0		
Fringe Benefits	\$ 0		
Travel	\$ 0		
Equipment	\$ 0		
Supplies	\$ 0		
Contractual	\$ 0		
Other	\$ 0		
Total Direct Costs	\$ 0		
Total Indirect Costs (may not exceed 8% of direct costs)	\$ 0		
Total Budget	\$ 0		

	Total Budget	\$ 0	
Comments: (limit 1,000 characters and sp	paces)		
Budget attachment: * Excel spreadshee (Note: The file must have a .xls extension a			
(Click the "Browse" button to attach an eleattached to this report. Uploading a docume			udget file. Only one spreadsheet may be
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