

Section 1—Executive Summary

The purpose of the legislation that established Title III-A, Sec. 317 is to “provide grants and related assistance to Alaska Native-serving institutions and Native Hawaiian-serving institutions to enable such institutions to improve and expand their capacity to serve Alaska Natives and Native Hawaiians.”

- A. Use this section to summarize how your grant is enabling your institution to fulfill the legislative intent of the Title III-A, Sec. 317 Program.
 1. Summarize, in 250 words or less, the impact your Title III-A, Sec. 317 grant has had this year in your institution’s capacity to contribute to fulfilling the goals of the legislation.

2. How has the grant helped to carry out the mission of the institution?

3. How did the cooperative arrangement aspect of the grant benefit the institutions involved?

3. Tell us about any challenges that you have had during the reporting period or that you anticipate in the coming year which may affect your ability to meet the goals of your grant. Include, if applicable, your institution's plans to meet these challenges.

4. Has the grant facilitated or contributed to bringing additional resources to your institution, for example, new Federal, State, or local dollars that can be attributed partly to your grant activities?

5. How would you improve or change the Program (e.g., customer service, allowable activities, regulations, statute)?

Section 2: Enrollment by Race and Ethnicity (4-Year Institutions)

Please report undergraduate student enrollment as of October 15, 2004 and the number of those students who received Pell Grants. Because these data are taken from your IPEDS survey, please use the IPEDS definition of full-time student. [Note: Obtain the information from Part A of your most recent IPEDS Fall Enrollment Survey.]

Enrollment by Race and Ethnicity as of October 15, 2004

Undergraduates	Total Number Enrolled		
	Full-time students	Full-time, First-time, First-year, Degree-seeking students	Students who received Pell Grants
Nonresident alien			
Black, non-Hispanic			
American Indian or Alaskan Native			
Asian or Pacific Islander			
Hispanic			
White, non-Hispanic			
Race/ethnicity unknown			
Grand Total			

Section 2: Enrollment by Age and Gender (4-Year Institutions)

Please report the number of undergraduate students, by age and gender, enrolled as of the institution's official fall reporting date or as of October 15, 2004 [Note: the information for this table can be obtained from Part B of your IPEDS Enrollment Survey for the most recent year available]. Because these data are taken from your IPEDS survey, please use IPEDS definitions for full-time and part-time students.

Enrollment by Age and Gender as of October 15, 2004

Under-grads	Total Number Enrolled				Total Students		Grand Total
	Full time		Part time		Male	Female	
Age/Gender	Male	Female	Male	Female	Male	Female	
Under 18							
18-19							
20-21							
22-24							
25-29							
30-34							
35-39							
40-49							
50-64							
65 and over							
Age Unknown							

Section 2: Degrees Awarded by Race, Ethnicity, and Discipline

Data for this section has been automatically uploaded for you. Please review it and verify that it is accurate. The information is for degrees conferred between July 1, 2004 and June 30, 2005 by race, ethnicity and discipline for students in undergraduate programs only. The CIP (Classification of Instructional Programs) codes were used in designating students appropriately.

Degrees Awarded by Race, Ethnicity, and Discipline

	CIP Code	Nonresident alien	Black, non-Hispanic	American Indian or Alaskan Native	Asian or Pacific Islander	Hispanic	White, non-Hispanic	Race/ethnicity unknown	Total
Biological Sciences/Life Sciences	26								
Computer & Information Sciences	11								
Health Profession & Related Sciences	51								
Business Management and Administrative Services	52								
Education	13								
Engineering	14								
Mathematics	27								
Physical Sciences	40								
Agricultural Sciences	02								
Social Sciences and History	45								
Visual and Performing Arts	50								
Other (please specify):									
Total Race/Ethnicity									

Section 2: Accreditation

Who is your institution's primary accrediting agency? [Please check only one.]

- Southern Association of Colleges and Schools
- The Higher Learning Commission of the North Central Association
- New England Association of Schools and Colleges
- Middle States Association of Colleges and Schools
- Western Association of Schools and Colleges
- Northwest Association of Schools and Colleges
- Other (please specify) _____

Section 3: Grant Activities and Focus Area

In this section, we want to get a sense of what types of activities Title III or V is supporting at your institution. We want to know how those activities are helping to address the problems described in your grant application, and how they are improving academic quality, student services and outcomes, institutional management, and fiscal stability.

To begin, enter the *total* amount of Title III or V funds used during this reporting period to support your project. On the second line, please enter the *total* amount of Title III or V funds used during this reporting period to support the project management and evaluation of the entire project. The fourth line will be automatically generated to reflect the total costs dedicated to supporting grant activities. **These fields must be filled in and greater than 0 before proceeding.**

Enter total federal dollars spent on your Title III or Title V grant during the reporting period:

Enter total federal dollars spent on your Title III or Title V project management and evaluation during the reporting period:

Enter the total number of Activities carried out during the reporting period (as described in your grant proposal)

Total federal dollars spent on your Title III or Title V activities during the reporting period: **\$00,000.00**

You will have the opportunity to enter or edit additional grant application activities as necessary throughout this section.

- [Activity 1](#)
- [Activity 2](#)
- [Activity 3](#)

Section 3: Grant Activities and Focus Area

In this section, we want to get a sense of what types of activities Title III or V is supporting at your institution. We want to know how those activities are helping to address the problems described in your grant application, and how they are improving academic quality, student services and outcomes, institutional management, and fiscal stability

Line 1: Enter the title of the grant activity(ies) as related in your application and carried out during this reporting period. **Please note that for the purposes of the annual report, endowment should be considered a separate activity even if it was not presented as a separate activity in your application.** You will have the opportunity to enter additional grant application activities as necessary

Line 2: Enter the total amount of Title III or V funds used during this reporting period to support each grant activity. This total amount should include any costs associated with the management of the activity such as the appropriate percentage of key personnel salaries and benefits devoted to that activity.

Line 3: Select one of four focus areas Fiscal Stability, Institutional Management, Student Services and Outcomes, and Academic Quality for each activity. Refer to the definitions of the four focus areas for samples of activities that fall into each category. [The answer to this question will determine which Focus Area Outcomes table(s) that is filled out.]

Please keep in mind that these categories are meant to apply to the activity's overall outcome **not** the processes used to achieve that outcome. For example, you might have an activity to improve retention of science majors that is being carried out over the entire length of your grant. The ultimate outcome of this activity is a Student outcome and therefore would be categorized as "Student Services and Outcomes" even though you might have implemented various strategies or processes to achieve that goal during the reporting period, such as improved library collections, acquisition of teaching/lab equipment, and faculty development. You **will** have an opportunity to report on those processes later on in the process measure table.

Legislative Allowable Activities Table: In this table, we want to develop a profile of how program funds are distributed within the various Legislative Allowable Activities (LAA) categories. Please determine how much of the total funds used for the grant activity (Line 2) is distributed within the LAA categories and enter the dollar amount. Please note that you may have an activity that does not fall into one of the LAA categories - this is acceptable as long as that activity fulfills the goals of the legislation. In these cases you will be asked to provide a brief description of those activities in the "other" option. NOTE: The dollar amount entered in Line 2 for each grant activity should equal the sum of the dollar amounts distributed in the LAA categories.

Grant activity carried out during this reporting period in your grant application:

Total \$ spent on this activity during the current reporting period: _____

Focus area: ___ Academic Quality ___ Student Services and Outcomes
 ___ Fiscal Stability ___ Institutional Management

LAA Category [Note: All listed activities are directly from legislation.]	Dollars spent	% of Activity
Purchase, rental, or lease of scientific or laboratory equipment for educational purposes, including instructional and research purposes.		
Renovation and improvement in classrooms, libraries, laboratories, and other instructional facilities.		
Support of faculty exchanges, faculty development, and faculty fellowships to assist in attaining advanced degrees in the field of instruction of the faculty.		
Curriculum development and academic instruction.		
Purchase of library books, periodicals, and other educational materials.		
Funds management, administrative management, and acquisition of equipment for use in strengthening funds management.		
Joint use of facilities, such as laboratories and libraries.		
Academic tutoring and counseling programs and student support services.		
OTHER ACTIVITIES--PLEASE DESCRIBE IN SIMILAR DETAIL		
GRAND TOTAL		

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Purchase, rental, or lease of scientific or laboratory equipment for educational purposes, including instructional and research purposes.*

Did the amount of scientific or laboratory educational equipment rented or leased increase?

If yes: Start \$ spent on equipment _____
End \$ spent on equipment _____
Application objective _____

Did the quality of scientific or laboratory educational equipment rented or leased increase?

No standardized data elements

Did student access to scientific or laboratory educational equipment rented or leased increase?

If yes: Start # of students _____
End # of students _____
Application objective _____

Did the amount of scientific or laboratory educational equipment purchased increase?

If yes: Start \$ spent on equipment _____
End \$ spent on equipment _____
Application objective _____

Did the quality of scientific or laboratory educational equipment purchased increase?

No standardized data elements

Did student access to scientific or laboratory educational equipment purchased increase?

If yes: Start # of students _____
End # of students _____
Application objective _____

Did the amount of scientific or laboratory research equipment rented or leased increase?

If yes: Start \$ spent on equipment _____
End \$ spent on equipment _____
Application objective _____

Did the quality of scientific or laboratory research equipment rented or leased increase?

No standardized data elements

Did student access to scientific or laboratory research equipment rented or leased increase?

If yes: Start # of students _____
End # of students _____
Application objective _____

Did the amount of scientific or laboratory research equipment purchased increase?

If yes: Start \$ spent on equipment _____
End \$ spent on equipment _____
Application objective _____

Did the quality of scientific or laboratory research equipment purchased increase?

No standardized data elements

Did student access to scientific or laboratory research equipment purchase increase?

If yes: Start # of students _____
End # of students _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Renovation and improvement in classrooms, libraries, laboratories, and other instructional facilities.*

Did the number of classrooms constructed increase?

If yes: Start # of wired classrooms _____
End # of wired classrooms _____
Application objective _____

Did the square feet of library space constructed increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of laboratories constructed increase?

If yes: Start # labs _____
End # labs _____
Application objective _____

Did the square feet of other institutional space constructed increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of classrooms maintained increase?

If yes: Start # wired classrooms _____
End # wired classrooms _____
Application objective _____

Did the square feet of library space maintained increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of laboratories maintained increase?

If yes: Start # labs _____
End # labs _____
Application objective _____

Did the square feet of other institutional space maintained increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of classrooms renovated or improved increase?

If yes: Start # wired classrooms _____
End # wired classrooms _____
Application objective _____

Did the square feet of library space renovated or improved increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of laboratories renovated or improved increase?

If yes: Start # labs _____
End # labs _____
Application objective _____

Did the square feet of other institutional space renovated or improved increase?

If yes: Start square feet _____
End square feet _____
Application objective _____

Did the number of classrooms wired for the internet increase?

If yes: Start # wired classrooms _____
End # wired classrooms _____
Application objective _____

Did the number of access terminals to library databases and records increase?

If yes: Start # _____
End # _____
Application objective _____

Did the amount of instructional facilities with deferred maintenance needs decrease?

If yes: Start total square feet _____
End total square feet _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Support of faculty exchanges, faculty development, and faculty fellowships to assist in attaining advanced degrees in the field of instruction of the faculty.*

Did the number of faculty trained in educational technology increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty trained in new or alternative teaching techniques increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty developing new curriculum increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty developing new teaching techniques increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty receiving fellowships or other assistance to attain advanced degrees increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty with advanced degrees increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty participating in faculty exchanges increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Did the number of faculty participating in developmental activities (seminars, workshops, etc.) increase?

If yes: Start # of faculty _____
End # of faculty _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Curriculum development and academic instruction.*

Did the number of new academic programs increase?

If yes: Start # of academic programs _____
End # of academic programs _____
Application objective _____

Did the number of academic courses under development increase?

If yes: Start # of academic programs _____
End # of academic programs _____
Application objective _____

Did the number of academic courses undergoing revision increase?

If yes: Start # of courses _____
End # of courses _____
Application objective _____

Did the academic attainment of students in revised courses increase?

If yes: Methodology used (check all that apply):
 Teacher survey
 Test scores
 Class observation

Did the course completion rate of students in revised courses increase?

If yes: Start % completion rate _____
End % completion rate _____
Application objective _____

Did the course satisfaction rate of students in revised courses increase?

If yes: Start % satisfaction _____
End % satisfaction _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Purchase of library books, periodicals, and other educational materials, including telecommunications program material.*

Did the number of library books increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of periodical subscriptions increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of educational materials increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of telecommunications program materials increase?

If yes: Start # _____
End # _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Funds management, administrative management, and acquisition of equipment for use in strengthening funds management.*

Was the number of FTE hired for improvement of funds management increased?

If yes: Start FTE _____
End FTE _____
Application objective _____

Were relevant staff trained in how to use new funds management systems?

If yes: Start # trained staff _____
End # trained staff _____
Application objective _____

Were the number of FTE hired for improvement of administrative management systems increased?

If yes: Start FTE _____
End FTE _____
Application objective _____

Were relevant staff trained in how to use new administrative management systems?

If yes: Start FTE trained _____
End FTE trained _____
Application objective _____

Did you establish or enhance a funds management quality control system?

No standardized data elements

Did you establish or enhance a purchasing and inventory management system?

No standardized data elements

Did you establish or enhance a student financial aid system?

No standardized data elements

Did you establish or enhance an institutional research system?

No standardized data elements

Did you establish or enhance an admissions or registration system?

No standardized data elements

Did you establish or enhance a student tracking system?

No standardized data elements

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Joint use of facilities, such as laboratories and libraries.*

Was there an increase in the quality and utility of facilities available?

No standardized data elements

Was there an increase in available joint library services?

No standardized data elements

Was there an increase in access (increased hours, access to more educational materials) to joint facilities for students)?

No standardized data elements

Were the number of students using joint laboratories increased?

If yes: Start # of students _____
End # of students _____
Application objective _____

Was there an increase in access (increased hours, access to more education materials) to joint facilities for faculty?

No standardized data elements

Was there an increase in available joint library space?

If yes: Start square feet _____
End square feet _____
Application objective _____

Was there an increase in available joint library holdings?

If yes: Start # holdings _____
End # holdings _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Tutoring, counseling, and student service programs designed to improve academic success.*

Did the number of tutors increase?

No standardized data elements

Did the quality of tutors increase?

No standardized data elements

Did access to tutors increase?

No standardized data elements

Did the number of counselors increase?

No standardized data elements

Did the number of students using tutoring services increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of students using counseling services increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of students satisfied with tutoring services increase?

If yes: Start # _____
End # _____
Application objective _____

Did the number of students satisfied with counseling services increase?

If yes: Start # _____
End # _____
Application objective _____

Did the academic attainment of students using tutoring services increase?

If yes: Methodology used (check all that apply):
 Teacher survey
 Test scores
 Class observation

Did the course completion rate of students using tutoring services increase?

If yes: Start % completion rate _____
End % completion rate _____
Application objective _____

Did the course completion rate of students using counseling services increase?

If yes: Start % completion rate _____
End % completion rate _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Process Measures

Please complete the following table to let us know what you have accomplished during the past year in this LAA category for this Activity.

LAA Category *Other:*

Other: _____

If yes: Start _____
End _____
Application objective _____

Other: _____

If yes: Start _____
End _____
Application objective _____

Section 3: Focus Area Outcomes – Academic Quality

The following are institutional outcomes that can be categorized in the Academic Quality focus area. Please provide information on at least two of the measures that you feel are *most reflective of your activities supported by Title III/V funds* for the current reporting period. You have the option of entering your own unique outcome goals in the area marked "Other."

You should indicate whether you achieved the related outcome during this reporting period. Remember, you are only required to select at least two outcomes. Many grantees might be in their first grant year and unable to report on any outcomes. If this is the case, you should indicate which goals you will report on next year.

In some instances, it might be necessary to provide a statement that supports your response. (Your supporting statement should be limited to 2 to 3 sentences.)

Row below each item: If you indicate that you have achieved a certain goal, please provide supporting data elements: the initial data point related to the outcome goal, the final data point related to the outcome goal, and the actual outcome goal as stated in your grant application. Note that certain intangible goals will require you to select an appropriate "rating" (e.g., poor, fair, good, excellent).

Has the number of new academic programs increased?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of specialized accreditations increased?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has retention of full time tenure track faculty improved?

If yes: Initial average annual retention rate _____
Final average annual retention rate _____
Goal _____

I would like to provide a brief supporting statement:

Has recruitment of faculty for full time tenure track positions improved?

If yes: Initial recruitment time _____
Final recruitment time _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's library holdings increased?

If yes: Initial # of holdings _____
Final # of holdings _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's education technology infrastructure improved?

If yes: Initial: ___ poor ___ fair ___ good ___ excellent
Final ___ poor ___ fair ___ good ___ excellent
Goal _____

I would like to provide a brief supporting statement:

Has the quality of the institution's classroom space improved?

If yes: Initial: ___ poor ___ fair ___ good ___ excellent
Final ___ poor ___ fair ___ good ___ excellent
Goal _____

I would like to provide a brief supporting statement:

Has the quantity of the institution's classroom space improved?

If yes: Initial square feet _____
Final square feet _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of *non-traditional* students increased?

If yes: Initial enrollment _____
Final enrollment _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of *part time* students increased?

If yes: Initial enrollment _____
Final enrollment _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of *minority* students increased?

If yes: Initial enrollment _____
Final enrollment _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of *rural* students increased?

If yes: Initial enrollment _____
Final enrollment _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of *low-income* students increased?

If yes: Initial enrollment _____
Final enrollment _____
Goal _____

I would like to provide a brief supporting statement:

Has the completion rate of *non-traditional* students increased?

If yes: Initial completion rate _____
Final completion rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the completion rate of *part time* students increased?

If yes: Initial completion rate _____
Final completion rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the completion rate of *minority* students increased?

If yes: Initial completion rate _____
Final completion rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the completion rate of *rural* students increased?

If yes: Initial completion rate _____
Final completion rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the completion rate of *low-income* students increased?

If yes: Initial completion rate _____
Final completion rate _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Section 3: Focus Area Outcomes – Fiscal Stability

The following are institutional outcomes that can be categorized in the Fiscal Stability focus area. Please provide information on at least two of the measures that you feel are *most reflective of your activities supported by Title III/V funds* for the current reporting period. You have the option of entering your own unique outcome goals in the area marked "Other."

You should indicate whether you achieved the related outcome during this reporting period. Remember, you are only required to select at least two outcomes. Many grantees might be in their first grant year and unable to report on any outcomes. If this is the case, you should indicate which goals you will report on next year.

In some instances, it might be necessary to provide a statement that supports your response. (Your supporting statement should be limited to 2 to 3 sentences.)

Row below each item: If you indicate that you have achieved a certain goal, please provide supporting data elements: the initial data point related to the outcome goal, the final data point related to the outcome goal, and the actual outcome goal as stated in your grant application. Note that certain intangible goals will require you to select an appropriate "rating" (e.g., poor, fair, good, excellent).

Has the institution's net assets increased?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's net income increased?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's endowment increased?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has state institutional financial support increased?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has private institutional financial support increased?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of private sector donors increased?

If yes: Start # _____
End # _____
Goal _____

I would like to provide a brief supporting statement:

Was there a reduction in the amount of institutional borrowing?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Have grant activities been taken over financially by the institution?

If yes: Start \$ _____
End \$ _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

If yes: Start _____
End _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

If yes: Start _____
End _____
Goal _____

I would like to provide a brief supporting statement:

Section 3: Focus Area Outcomes – Institutional Management

The following are institutional outcomes that can be categorized in the Institutional Management focus area. Please provide information on at least two of the measures that you feel are *most reflective of your activities supported by Title III/V funds* for the current reporting period. You have the option of entering your own unique outcome goals in the area marked "Other."

You should indicate whether you achieved the related outcome during this reporting period. Remember, you are only required to select at least two outcomes. Many grantees might be in their first grant year and unable to report on any outcomes. If this is the case, you should indicate which goals you will report on next year.

In some instances, it might be necessary to provide a statement that supports your response. (Your supporting statement should be limited to 2 to 3 sentences.)

Row below each item: If you indicate that you have achieved a certain goal, please provide supporting data elements: the initial data point related to the outcome goal, the final data point related to the outcome goal, and the actual outcome goal as stated in your grant application. Note that certain intangible goals will require you to select an appropriate "rating" (e.g., poor, fair, good, excellent).

Has the number of specialized accreditations improved?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's information management infrastructure improved?

If yes: Initial \$ of infrastructure _____
Final \$ of infrastructure _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's information management capabilities improved?

If yes: Initial ___ poor ___ fair ___ good ___ excellent
Final ___ poor ___ fair ___ good ___ excellent
Goal _____

I would like to provide a brief supporting statement:

Has the institution's conformance with external standards improved?

If yes: ___ accrediting agency ___ federal ___ state ___ other

I would like to provide a brief supporting statement:

Has the institution's deferred maintenance needs decreased?

If yes: Initial \$ _____
Final \$ _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's teaching classroom space increased?

If yes: Initial square feet _____
Final square feet _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's research facilities space increased?

If yes: Initial square feet _____
Final square feet _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's library space increased?

If yes: Initial square feet _____
Final square feet _____
Goal _____

I would like to provide a brief supporting statement:

Has the institution's teaching laboratory space increased?

If yes: Initial square feet _____
Final square feet _____
Goal _____

I would like to provide a brief supporting statement:

Have outreach programs to increase enrollment of secondary school students been established?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the enrollment of the outreach targeted secondary students increased?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Have outreach programs to increase the academic attainment of secondary school students been established?

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the academic attainment of the outreach targeted secondary students increased?

If yes: Methodology:
___ Teacher survey
___ Test scores
___ Admission rate

I would like to provide a brief supporting statement:

Other: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Section 3: Focus Area Outcomes – Student Services and Outcomes

The following are institutional outcomes that can be categorized in the Student Services and Outcomes focus area. Please provide information on at least two of the measures that you feel are *most reflective of your activities supported by Title III/V funds* for the current reporting period. You have the option of entering your own unique outcome goals in the area marked "Other."

You should indicate whether you achieved the related outcome during this reporting period. Remember, you are only required to select at least two outcomes. Many grantees might be in their first grant year and unable to report on any outcomes. If this is the case, you should indicate which goals you will report on next year. If applicable, you have the option of defining the cohort of students for which this outcome is being measured. Among other things, your cohort might be based on your academic year, a sub-population of students (e.g., students with deficiencies in basic skills), or another point in time. Please be concise in this area.

In some instances, it might be necessary to provide a statement that supports your response. (Your supporting statement should be limited to 2 to 3 sentences.)

Row below each item: If you indicate that you have achieved a certain goal, please provide supporting data elements: the initial data point related to the outcome goal, the final data point related to the outcome goal, and the actual outcome goal as stated in your grant application. Note that certain intangible goals will require you to select an appropriate "rating" (e.g., poor, fair, good, excellent).

Has the institution's retention rate improved?

Cohort: _____

If yes: Initial rate _____
Final rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the average number of credits completed by students improved?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the average GPA of students improved?

Cohort: _____

If yes: Initial GPA _____
Final GPA _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of students continuing to further postsecondary education improved?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the retention rate of students who received academic counseling increased?

Cohort: _____

If yes: Initial rate _____
Final rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the retention rate of students who received tutoring services increased?

Cohort: _____

If yes: Initial rate _____
Final rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the retention rate of students who participated in other student services programs increased?

Cohort: _____

If yes: Initial rate _____
Final rate _____
Goal _____

I would like to provide a brief supporting statement:

Has the average number of credits completed by students who received academic counseling increased?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the average number of credits completed by students who received tutoring services increased?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the average number of credits completed by students who participated in other student services increased?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the average GPA of students who received academic counseling increased?

Cohort: _____

If yes: Initial GPA _____
Final GPA _____
Goal _____

I would like to provide a brief supporting statement:

Has the average GPA of students who received tutoring increased?

Cohort: _____

If yes: Initial GPA _____
Final GPA _____
Goal _____

I would like to provide a brief supporting statement:

Has the average GPA of students who participated in other student services programs increased?

Cohort: _____

If yes: Initial GPA _____
Final GPA _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of students continuing to further postsecondary education that received academic counseling increased?

Cohort: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of students continuing to further postsecondary education who received tutoring increased?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Has the number of students continuing to further postsecondary education who participated in other student services increased?

Cohort: _____

If yes: Initial # _____
Final # _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

Cohort: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Other: _____

Cohort: _____

If yes: Initial _____
Final _____
Goal _____

I would like to provide a brief supporting statement:

Section 4: Project Status

Continued funding requires evidence of substantial progress towards meeting your activity objectives. From your application, please list your objectives for each activity carried out this reporting period.

Activity: _____

On Schedule Activity Objectives:

Section 4: Project Status

Activity: _____

Narrative Supporting Completed Objectives

Please provide brief statements, with data and references to goals stated in your application as appropriate, to document the objectives that were “completed” during the reporting period.

Activity Objective

Evidence of Completion

Section 4: Project Status

Activity: _____

Changes to Objective Schedule

Please provide brief statements, with data and references to goals stated in your application as appropriate, to support and explain the need for objective schedule changes.

Activity Objective	Reason(s) for change	Expected completion date
--------------------	----------------------	--------------------------

Section 4: Project Status

Activity: _____

Changes to Activity Objectives

Please provide brief statements, with data and references to goals stated in your application as appropriate, to support and explain the need for the changes of objectives during the reporting period.

Activity Objective	Proposed objective change	Reason(s) for change	Has this change been approved by the ED Program office?
--------------------	---------------------------	----------------------	---

Section 4: Budget

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8
Budget Categories	Carryover Balance from Previous FY	Actual Budget	Expenditures	Non-Federal Expenditures	Carryover Balance	Next Year's Actual Budget	Changes? Y/N
Personnel							
Fringe Benefits ___%							
Travel							
Equipment							
Supplies							
Contractual							
Construction							
Other							
Endowment							
Total Costs							

Section 4: Line Item Budget Narrative

Please describe how funds will be expended as a result of your changes in each of the line item categories.

Personnel

Fringe Benefits

Travel

Equipment

Supplies

Contractual

Construction

Other

Endowment

Section 4: Summary Budget Narrative

Please explain budget changes, as needed, particularly the use of funds from cost savings, carryover funds and other expanded authorities changes to your budget. Provide an explanation if you are NOT expending funds at the expected rate. Describe any significant changes to your budget resulting from modifications of project activities.