

# High School Equivalency Program (HEP) and College Assistance Migrant Program (CAMP)

## Annual Performance Report 2021-2022 Reporting Period



OFFICE OF MIGRANT EDUCATION  
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The mission of the Office of Migrant Education is to provide excellent leadership, technical assistance, and financial support to improve the educational opportunities and academic success of migratory children, youth, agricultural workers, fishers, and their families.


## PRESENTATION PURPOSE

- Overview of how to complete the fiscal year (FY) 2022 Annual Performance Report (APR) for the 2021-2022 reporting period.
- Overview of basic information regarding the Annual Performance Report (APR) submission process.
- Understand common errors in completing the report and submitting data.
- Share tips for creating a high-quality report.

*Please Note: If you are part of a new project (FY22 cohort) without a previous HEP or CAMP grant, you will not complete the APR this year, but you will be required to submit the Interim Performance Report (IPR) in February 2023.*

# AUTHORITIES

Higher Education Act of 1965 – Section 418A as amended by Section 408 of the Higher Education Opportunity Act (HEOA), P.L. 110-315



Education Department General Administrative Regulations (EDGAR), 34 CFR 75.118



College Assistance Migrant Program and High School Equivalency Program Annual Performance Report and Final Report Instructions (OMB No. 1810-0727)

*The Department also requires grantees to report annually on their progress toward meeting performance measures established under the Government Performance and Results Act (GPRA).*

## ANNUAL PERFORMANCE REPORT (APR)

The APR is a report a grantee must submit to receive continued funding under a multi-year award.

The report provides the most current performance and financial information about a discretionary grant or cooperative agreement (see [EDGAR § 75.118](#)).

# APR SUBMISSION PROCESS

- OME sent a message on **Thursday, September 8, 2022** on the HEP/CAMP listserv.
- OME sent a G5 blast on **Thursday, September 8, 2022**.

## 2 Files

- 1 Performance Report Data Form (MS Excel)
- 1 Cover Sheet Form (MS Word)

## Instructions

Grantees will complete and email the FINAL versions of BOTH files as 2 attachments in one email to [hepcampAPR@ed.gov](mailto:hepcampAPR@ed.gov) by **Wed., Nov. 9, 2022** using the OME-provided naming conventions listed below. In the email subject line, please enter your PR # and institution name.

- FY2022.PR #.Name of Institution.APR Cover Sheet  
(Example: FY2022.S149A221234.Utopia University.APR Cover Sheet)
- FY2022.PR #.Name of Institution.APR Data Form  
(Example: FY2022.S149A221234.Utopia University.APR Data Form)

## APR FILES

Please email Dr. Sandra Toro or  
Jessica Stein at  
[hepcampAPR@ed.gov](mailto:hepcampAPR@ed.gov)  
if you did not receive the following:

- File 1: Cover Sheet (MS Word)
- File 2: Performance Report Data Form: Blocks A to E&F (MS Excel)
- File 3: Optional Grantee Student Workbook (MS Excel) (optional)
- File 4: Instructions (MS Word).

# ORGANIZATION OF THE APR

The APR is organized into two (2) reporting files:

- Cover Sheet. (MS Word)
- Performance Report Data Form: Blocks A-F. (MS Excel)

<u>Sections</u>	<u>Type</u>	<u>Reporting File</u>	<u>Submitted As</u>	<u>Submitted To</u>
Cover Sheet	Text/Signature	MS Word	PDF	<b>Please send final versions of all sections (2 files) as attachments to OME at <a href="mailto:hepcampAPR@ed.gov">hepcampAPR@ed.gov</a>. Please enter your PR # and institution name into the email subject line.</b>
Block A	Numerical	MS Excel	MS Excel	
Block B	Numerical	MS Excel	MS Excel	
Block C	Numerical	MS Excel	MS Excel	
Block D	Text	MS Excel	MS Excel	
Blocks E and F	Text and Numerical	MS Excel	MS Excel	





## 2022 APR REPORTING PERIOD

The APR Reporting Period is aligned with the 12-month current budget period:

**July 1, 2021 – June 30, 2022**

Due Date - APR: Your final version of the APR must be submitted by **Wednesday, November 9, 2022.**

Due Date – Final Performance Report: All recipients, in accordance with EDGAR §75.590, are required to submit a final performance report. The Final Performance Report must be submitted by **Friday, October 28, 2022.** If you receive a no-cost time extension from ED for the fifth year of this grant, the Final Performance Report is due **120** days after the revised project period end date.

## BLOCK A TERMS

- Reporting Period
- Number Funded to be Served
- Number Served
- New Participant
- Returning Participant
- Attainers
- Persisters
- Completers
- Placed/Continued Postsecondary Education
- Withdrawals

## NUMBER FUNDED TO BE SERVED

- Number of students funded to be served by the HEP/CAMP grant in the approved application.
- Enrolled in HEP/CAMP instruction in your HEP/CAMP project during the reporting period.
- Can serve more students than the number for which you are funded.
- Generally cannot be amended or changed.

## NUMBER SERVED (HEP)

The number of HEP High School Equivalency (HSE) eligible students who completed intake and were enrolled and attending HEP HSE instruction for at least 12 hours of instructional services in this reporting period or who were enrolled for the sole purpose of taking the HSE assessment in the reporting period.

## NUMBER SERVED (CAMP)

The number of CAMP students who completed intake and were enrolled and attending college courses past the date when students can no longer add/drop courses, or a census date (whichever is the point when a student's official enrollment status for the academic term is evaluated).

## HEP/CAMP NEW PARTICIPANTS

- Participants who were new to the project.
  - A subset of the number served.
- HEP Students - Completed intake, and were enrolled and attending HSE instruction for at least 12 hrs.
- CAMP Students – completed intake, enrolled full-time, and attending college past the date when students can no longer add/drop courses, or a census date.
- A student who was served in the immediately previous budget period who returned during the current reporting period **after the APR due date** would be considered a new student.

## RETURNING PARTICIPANTS

- Did not attain an HSE (HEP) or did not complete the first academic year of college (CAMP) in the budget period immediately previous to the one being reported.
- HEP Students - Completed intake and were enrolled and attending HSE instruction for at least 12 hours in current budget period before APR due date.
- CAMP Students - Enrolled full-time past the add/drop date during the current budget period before APR due date.

## ATTAINERS (HEP)

- HEP students who received an HSE certificate by the end of the reporting period (budget period).
- Projects maintain a database of the students enrolled, identifying those students who attain a HSE as well as the date of HSE attainment (this is the actual date that the student took the last HSE exam).
- Students who may not complete HSE coursework, but attain an HSE, are counted as attainers.



## PERSISTERS – HEP AND CAMP

- Did not attain a HSE or did not complete their first academic year of college.
- HEP and CAMP - Re-enrolled for continuing instructional services in support of a HSE or completing their first academic year of postsecondary education in the subsequent budget period prior to the APR submission due date.
- HEP- Must attend HEP HSE instruction for at least 12 hours of instructional services or re-enrolled for the sole purpose of taking the HSE assessment in the subsequent budget period prior to the APR submission due date.
- CAMP - They must remain enrolled past the date after which they can no longer add/drop courses, or a census date.

## FIRST YEAR COMPLETERS (CAMP)

- Must be enrolled at the institution of higher education (IHE) in CAMP with **full-time** status during all academic terms of the regular academic year.
- Successfully completed their **first academic year in good standing.**
  - First academic year: among other things, completes a minimum of 24 semester or trimester credit-hours or 36 quarter credit-hours or 900 clock-hours for a program measured in clock-hours.
  - Successfully completed: if the IHE considers student to have passed coursework associated with those hours.
- \*IHE shall **exclude college credits** earned before the student's graduation from **high school.**
- \*IHEs may, but are not required to, include remedial and English as a Second Language (ESL) coursework.

## PLACED (HEP)

- Placement of HSE Attainers
  - Those who attained a HSE in the current reporting period
  - The number who entered:
    - postsecondary education or training programs,
    - upgraded employment,
    - or the military.
  - Captured any time after the HSE is attained but before the performance report is due for that same reporting period
  - **Actual placement**, not anticipated

## CONTINUING STUDENTS (CAMP)

- First academic year completers, the number of students who continued in postsecondary education programs.
  - To be counted as continuing in postsecondary education, students must re-enroll at an IHE in the academic year immediately following the one in which they are reported as a completer, and
  - Students must **remain enrolled past the date** when students can no longer add/drop courses, or census date.
- Measured any time after the first academic year of college is completed and before the performance report is due, and it should be based on actual enrollment and not on anticipated enrollment.

## WITHDRAWALS – HEP AND CAMP

- Number of Served HEP or CAMP students who:
  - Did not attain a HSE (for HEP),
  - Did not complete the first academic year of college (for CAMP), and
  - Did not return for instruction in the subsequent budget period prior to the APR due date (for both HEP and CAMP).


# 2022 HEP CAMP APR FORMS



# COVER SHEET

Grantee Name: \_\_\_\_\_ Grant Year:  Y1  Y2  Y3  Y4  Y5  
 PR Number: 514 \_\_\_\_\_ Reporting Period: 07/01/2021 — 06/30/2022

**The Cover Sheet Form**



**U.S. Department of Education**  
**Grant Performance Report Cover Sheet (ED 524B)**  
*Check only one box per Program Office instructions.*

[ ] Annual Performance Report [ ] Final Performance Report

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**General Information**

1. PR/Award #: \_\_\_\_\_ 2. Grantee NCES ID#: \_\_\_\_\_  
*(Block 5 of the Grant Award Notification - 11 characters.) (See instructions. Up to 12 characters.)*

3. Project Title: \_\_\_\_\_  
*(Enter the same title as on the approved application.)*

4. Grantee Name (Block 1 of the Grant Award Notification.): \_\_\_\_\_

5. Grantee Address (See instructions.) \_\_\_\_\_

6. Project Director (See instructions.) Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ph #: ( ) \_\_\_\_\_ - \_\_\_\_\_ Ext: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**Reporting Period Information (See instructions.)**

7. Reporting Period(s):

a) Reporting Period (12-month budget period) From: 07 / 01 / 2021 To: 06 / 30 / 2022 (mm/dd/yyyy)

b) Performance Period (5-year project period) From: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (mm/dd/yyyy)

**Budget Expenditures (To be completed by your Business Office. See instructions. Also see Section B.)**

**8. Budget Expenditures**

	Federal Grant Funds	Non-Federal Funds (Match/Cost Share)
a. Previous Budget Period <small>(previous 12-month Reporting Period)</small>		
b. Current Budget Period <small>(12-month Reporting Period)</small>		

OMB No. 1830-0684 Cover Sheet Page 1 of 2  
 Exp. 11/30/2024

Grantee Name: \_\_\_\_\_ Grant Year:  Y1  Y2  Y3  Y4  Y5  
 PR Number: 514 \_\_\_\_\_ Reporting Period: 07/01/2021 — 06/30/2022

<b>c. Entire Project Period</b> (5-year) <i>(For Final Performance Reports only)</i>		
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**Indirect Cost Information (To be completed by your Business Office. See instructions.)**

9. Indirect Costs

a. Are you claiming indirect costs under this grant?  Yes  No

b. If yes, do you have an Indirect Cost Rate Agreement approved by the Federal Government?  Yes  No

c. If yes, provide the following information:  
 Period Covered by the Indirect Cost Rate Agreement: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)  
 Approving Federal agency:  ED  Other (Please specify): \_\_\_\_\_  
 Type of Rate (For Final Performance Reports Only):  Provisional  Final  Other (Please specify): \_\_\_\_\_

d. For Restricted Rate Programs (check one) -- Are you using a restricted indirect cost rate that:  
 Is included in your approved Indirect Cost Rate Agreement?  
 Complies with 34 CFR 76.564(c)(2)?

**Human Subjects (Annual Institutional Review Board (IRB) Certification) (See instructions.)**

10. Is the annual certification of Institutional Review Board (IRB) approval attached?  Yes  No  N/A

**Performance Measures Status and Certification (See instructions.)**

11. Performance Measures Status

a. Are complete data on performance measures for the current budget period included in the Project Status Chart?  
 Yes  No

b. If no, when will the data be available and submitted to the Department? \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)

**12. To the best of my knowledge and belief, all data in this performance report are true and correct and the report fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of the data.**

Name of Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_


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# COVER SHEET

Grantee Name: \_\_\_\_\_  
PR Number: S14\_\_\_\_\_

Grant Year:  Y1  Y2  Y3  Y4  Y5  
Reporting Period: 07/01/2021 — 06/30/2022

**The Cover Sheet Form**



**U.S. Department of Education**  
**▲ Grant Performance Report Cover Sheet (ED 524B)**  
*Check only one box per Program Office instructions.*

Annual Performance Report  Final Performance Report

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**General Information**

1. PR/Award #: \_\_\_\_\_  
*(Block 5 of the Grant Award Notification - 11 characters.)*

2. Grantee NCES ID#: \_\_\_\_\_  
*(See instructions. Up to 12 characters.)*

3 Project Title: \_\_\_\_\_  
*(Enter the same title as on the approved application.)*

4. Grantee Name *(Block 1 of the Grant Award Notification.):* \_\_\_\_\_

5. Grantee Address *(See instructions.)*

6. Project Director *(See instructions.)* Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Ph #: ( ) \_\_\_\_\_ - \_\_\_\_\_ Ext: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Reporting Period Information *(See instructions.)***

7. Reporting Period(s):

a) Reporting Period (12-month budget period) From: 07 / 01 / 2021 To: 06 / 30 / 2022 (mm/dd/yyyy)

b) Performance Period (5-year project period) From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mm/dd/yyyy)



# COVER SHEET

**Budget Expenditures (To be completed by your Business Office. See instructions. Also see Section B.)**

## 8. Budget Expenditures

	<b>Federal Grant Funds</b>	<b>Non-Federal Funds (Match/Cost Share)</b>
<b>a. Previous Budget Period</b> (previous 12-month Reporting Period)		
<b>b. Current Budget Period</b> (12-month Reporting Period)		
<b>c. Entire Project Period (5-year)</b>  (For Final Performance Reports only)		

**Indirect Cost Information (To be completed by your Business Office. See instructions.)**

9. Indirect Costs

- a. Are you claiming indirect costs under this grant?  Yes  No
- b. If yes, do you have an Indirect Cost Rate Agreement approved by the Federal Government?  Yes  No
- c. If yes, provide the following information:
  - Period Covered by the Indirect Cost Rate Agreement: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)
  - Approving Federal agency:  ED  Other (Please specify): \_\_\_\_\_
  - Type of Rate (For Final Performance Reports Only):  Provisional  Final  Other (Please specify): \_\_\_\_\_
- d. For Restricted Rate Programs (check one) -- Are you using a restricted indirect cost rate that:
  - Is included in your approved Indirect Cost Rate Agreement?
  - Complies with 34 CFR 76.564(c)(2)?

**Human Subjects (Annual Institutional Review Board (IRB) Certification) (See instructions.)**

10. Is the annual certification of Institutional Review Board (IRB) approval attached?  Yes  No  N/A

**Performance Measures Status and Certification (See instructions.)**

11. Performance Measures Status

- a. Are complete data on performance measures for the current budget period included in the Project Status Chart?  
 Yes  No
- b. If no, when will the data be available and submitted to the Department? \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)

12. To the best of my knowledge and belief, all data in this performance report are true and correct and the report fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of the data.

\_\_\_\_\_  
Name of Authorized Representative: Title: \_\_\_\_\_

\_\_\_\_\_  
Signature: Date: \_\_\_/\_\_\_/\_\_\_

## COVER SHEET REMINDERS

- Check the grant year at the top of the first page. It should cover the reporting period, 7/1/2021 to 6/30/2022. If it does not, you are using an older version of the form.
- Enter exact previous and current budget expenditure amounts into section 8.
- The current expenditure amount in section 8b must match the total expenditure amount that you report in Block E of the APR data form.
- The Authorized Representative must complete section 12. Both wet and electronic signatures are acceptable.
- This form must be submitted as a PDF.

# PERFORMANCE REPORT DATA FORM

- For guidance, please refer to the notes found in the turquoise cells.
- On Blocks A, C, and E, you will see a data input accuracy result of either “Good Job” or “Pls check” in a green box.
- “Good Job” indicates that the totals appear to be accurate because they match other totals found in the file. Hidden formulas are making these calculations.
- If you receive a “Pls check” error, please check your data for accuracy.
- Lastly, please do not alter any sections of the data form. The formatting and formulas must remain consistent for all data submissions.

<b>Your data input accuracy result</b>	Pls check
<b>Your data input accuracy result</b>	Good Job

# PERFORMANCE REPORT DATA FORM, BLOCK A

Grantee Name:		No Data
PR Number:		No Data
Grant Year:		No Data
Reporting Period	2021-2022	No Data
<b>No Data</b>	<b>High School Equivalency Program</b> <b>U.S. Department of Education</b> <b>Annual Performance Report Data Form</b>	<b>No Data</b>
<b>A. HEP Project Statistics and Reporting for GPRA</b>	<b>No Data</b>	<b>No Data</b>
<b>Reporting Block, Item A1</b>	<b>Reporting Block A1 Item</b>	<b>Reporting Block A1 Response</b>
<b>A1.</b>	<b>Number of students served during the reporting period.</b>	
A1.a.	Number <b>funded</b> to be served.	
A1.b.	Number <b>served</b> in HEP HSE instruction (note: A1b1 + A1b2 should sum to equal A1b).	
A1.b.1.	Number served who were <b>new participants</b> (first year in HEP) (subset of A1b).	0
A1.b.2.	Number served who were <b>returning participants</b> (subset of A1b).	
<b>Reporting Block, Item A2</b>	<b>Reporting Block A2 Item</b>	<b>Reporting Block A2 Response</b>
<b>A2.</b>	<b>Status at the end of the reporting period. (Note: A2a-c should sum to equal the number reported in A1b(no. served)).</b>	
A2.a.	Number of HSE <b>attainers</b> . (Obj. 1 National Target: 69%) (GPRA 1)	0
A2.a.1.	Number of HSE attainers who were new participants.	
A2.a.2.	Number of HSE attainers who were returning participants.	
A2.a.3.	Number of HSE attainers who passed the HSE assessment in the English Language.	
A2.a.4.	Number of HSE attainers who passed the HSE assessment in the Spanish Language.	
A2.a.5.	Number of HSE attainers who passed the HSE assessment in a language other than English or Spanish.	
A2.b.	Number of <b>withdrawals</b> .	0
A2.b.1.	Number of withdrawals who were new participants.	
A2.b.2.	Number of withdrawals who were returning participants.	
A2.c.	Number of <b>persisters</b> (came back to continue in the subsequent budget period; persisters were enrolled in instructional services in the current reporting period but did not yet achieve a HSE and have returned by APR due date of the subsequent budget period to continue instructional services).	
<b>Your data input accuracy result</b>		<b>Good Job</b>

# PERFORMANCE REPORT DATA FORM, BLOCK A

A4.	Follow-up on HSE attainers from the reporting period.	
A4.a.	Number of HSE attainers you were able to track for follow-up data.	
<b>Reporting Block, Item A5</b>	<b>Reporting Block A15 Item</b>	<b>Reporting Block A5 Response</b>
A5.	Time to completion for HSE attainers from question A2a above. (Note: A5a-c should sum to equal the number reported in A2a.)	
A5.a.	Number of HSE attainers who got their HSE <b>within one</b> reporting period of your project.	
A5.b.	Number of HSE attainers who got their HSE after <b>more than one</b> , but within two reporting periods of your project.	
A5.c.	Number of HSE attainers who got their HSE after <b>more than two</b> reporting periods of your project.	
	<b>Your data input accuracy result</b>	Good
<b>Reporting Block, Item A6</b>	<b>Performance Calculation Table</b>	
Annual Award Amount		No Data
GPRA Measure 1	0.00%	No Data
GPRA Measure 2	0.00%	No Data
Success efficiency ratio	\$0	No Data
End of spreadsheet	No Data	No Data

Enter numerical data - the number of HSE attainers who got their HSE within one reporting period of your project.

## BLOCK A: REMINDERS

- Make sure that you have entered the correct grantee name and PR number. Select the correct grant year.
- Enter all required information into green and blue boxes. Do not leave any cells blank. If you are not reporting data, enter a zero (“0”) into the cell.
- Make sure that you receive “Good Job” indicators. If you receive a “Pls check” message, please check your calculations.
- Ensure data accuracy. For example, the number funded to be served must match the number found in your original application, and the annual award amount must match the amount found in your GAN.

# PERFORMANCE REPORT DATA FORM, BLOCK B

Grantee Name:	0	No Data
PR Number:	0	No Data
<b>B. HEP Project Student Participant Information</b>	<b>No Data</b>	<b>No Data</b>
<b>Reporting Block, Item B1</b>	<b>Reporting Block B1 Item</b>	<b>Reporting Block B1 Response</b>
B1	Educational and supportive services, and financial support received by HEP HSE enrolled students during the reporting period.	
B1.a.	Total HSE instruction hours received by all HEP HSE enrolled students.	
B1.b.	Total HSE instruction hours received by HSE attainers.	
B1.c.	Total number of students receiving the following types of services: 2 Instructional Support Services. Please indicate the number of students receiving instructional support services.	
B1.c.1.	Tutoring.	
B1.c.2.	Counseling or guidance services.	
B1.c.3.	Other Educational or Supportive Services, including mentoring or coaching, college transition services, work training services, transportation, child care, and job placement services.	
B1.c.4.	Financial support (Please indicate the number of students receiving financial support).	
B1.c.4.a.	Room and board.	
B1.c.4.b.	Stipends.	
B1.c.4.c.	Other financial support, including tuition, books and materials.	
End of Spreadsheet	No Data	No Data



## BLOCK B: REMINDERS

- Do not leave any cells blank. Please enter a zero (“0”) if you are not reporting data.
- Ensure data accuracy. Each student should be counted once. Instruction hours should be carefully tracked and reported accurately.

# PERFORMANCE REPORT DATA FORM, BLOCK C (HEP)

Grantee Name:	0	No Data
PR Number:	0	No Data
<b>C. HEP Project Services Information</b>	<b>No Data</b>	<b>No Data</b>
<b>Reporting Block, Item C1</b>	<b>Reporting Block C1 Item</b>	<b>Reporting Block C1 Response</b>
C1.	Project Model Characteristics during the Reporting Period.	
a.	Report the number of commuter students. (A commuter student is a student who does not live in IHE-funded housing.)	
b.	Report the number of residential students. (A residential student is a student who lives in IHE-funded housing.)	
	<b>Your data input accuracy result</b>	Good Job
c.	In what languages are project services provided? (Check all that apply.)	Choose one:
d.	Is this project in a four-year or two-year educational institution, or in a non-profit organization?	Choose one:
<b>Reporting Block, Item C2</b>	<b>Reporting Block C2 Item</b>	<b>Reporting Block C2 Response</b>
C2.	Project Student Assessment Information Related to this Reporting Period.	
a.	Which HSE assessment(s) does your project use?	Choose one: <input type="text" value="No"/>
End of Spreadsheet	No Data	No [ Choose the HSE

# PERFORMANCE REPORT DATA FORM, BLOCK C (CAMP)

Grantee Name:	0	No Data
PR Number:	0	No Data
<b>C. CAMP Project Services Information</b>	<b>No Data</b>	<b>No Data</b>
<b>Reporting Block, Item C1</b>	<b>Reporting Block C1 Item</b>	<b>Reporting Block C1 Response</b>
<b>C1.</b>	<b>Project Model Characteristics during the Reporting Period</b>	
C1.a.	Report the number of commuter students. (A commuter student is a student who does not live in IHE-funded housing.)	
C1.b.	Report the number of residential students. (A residential student is a student who lives in IHE-funded housing.)	
	<b>Your data input accuracy result</b>	<b>Good Job</b>
C1.c.	Is this project in a four-year or two-year educational institution?	Choose one:
C1.d.	Is the project in an institution that uses a semester, quarter, or trimester academic calendar?	Choose one:
<b>Reporting Block, Item C2</b>	<b>Reporting Block C2 Item</b>	<b>Reporting Block C2 Response</b>
<b>C2.</b>	<b>Test Information Collected during the Reporting Period</b>	
C2.a.	Does your project's IHE use SAT scores during the intake process?	Choose one:
C2.a.1.	What is the average score for all first-year IHE students? (English)	
C2.a.1.	What is the average score for all first-year IHE students? (Math)	
C2.a.2.	What is the average score for CAMP students? (English)	
C2.a.2.	What is the average score for CAMP students? (Math)	
C2.b.	Does your project's IHE use ACT scores during the intake process?	Choose one:
C2.b.1.	What is the average score for all first-year IHE students? (English)	
C2.b.1.	What is the average score for all first-year IHE students? (Math)	
C2.b.2.	What is the average score for CAMP students? (English)	
C2.b.2.	What is the average score for CAMP students? (Math)	
<b>End of Spreadsheet</b>	<b>No Data</b>	<b>No Data</b>

## BLOCK C: REMINDERS

- Do not leave any cells blank. Please enter a zero (“0”) if you are not reporting data.
- Ensure data accuracy. Each student should be counted once. CAMP Project Directors will need to collect institutional data in order to complete the score section.

# PERFORMANCE REPORT DATA FORM, BLOCK D

Grantee Name:	0
PR Number:	0
D. HEP Project Goals and Objectives	<b>Project Performance Objective Information</b>
Section 1.	Provide the Project Objective, performance measure (Target and Actual Performance Data) and explain the outcome (Include Qualitative Data, Data resulting from experimental Design, and Data Collection Information) (maximum 2500 words).
	Please insert a after green box if you need to enter more objectives.
Objective 1	<p>Example: Objective 1: To provide academic and instructional support for students to successfully complete the first year of college .</p> <p>1.1. Performance Measure: XX% of participants attained their HSE to meet the GPRA 1 target. Actual Performance Data : XXX Target: XXX</p> <p>1.1 Outcome: HEP exceeded objective 1 with a GPRA I completion rate of XX%. XXX of the XXX students served during the 2021 -2022 project year attained HSE. HEP students received educational support throughout the reporting period.</p> <p>1.2. Performance Measure: HEP participants will be computer literate and use computers. Target: XXX Actual Performance Data: XXX</p> <p>1.2 Outcome: 100% of participants pass a computer literacy test and apply knowledge of computers. All students demonstrated the ability to use computers to complete class assignments.</p>
Objective 2	<p>Objective 2:</p> <p>2.1. Performance Measure:</p> <p>2.1 Outcome:</p> <p>2.2. Performance Measure:</p> <p>2.2. Outcome:</p>
Objective 3	<p>Objective 3:</p> <p>3.1. Performance Measure:</p> <p>3.1. Outcome:</p>

# PERFORMANCE REPORT DATA FORM, BLOCK D – SECTION FOR FINAL PERFORMANCE REPORTS

Section 2	Only final year Grantees must answer each of the questions below:
Question 1	1. Utilizing the evaluation results, draw conclusions about the success of the project and/or its impact. Describe any unanticipated outcomes or benefits from the project and any barriers that may have been encountered.
No Data	
Question 2	2. What would you recommend as advice to other educators that are interested in your project? How did the original project ideas change as a result of conducting the project?
No Data	
Question 3	3. If applicable, describe your plans for continuing the project (sustainability; capacity building) and/or disseminating the project results.

## BLOCK D: REMINDERS

- Each objective should match the objectives stated in your original application.
- For Final Performance Reports, answer all questions in Section 2 of Block D. These questions cover the entire project report period (five years and, if applicable, the no-cost extension period).
- Do not leave any applicable section blank.

# PERFORMANCE REPORT DATA FORM, BLOCK E/F (BUDGET)

Budget Categories	Proposed Expenditures - Carryover	Proposed Expenditures - Recommended Amount	Proposed Expenditures - Total Approved, Revised Budget Amount	Actual Expenditures
	(a) Carryover from Previous Budget Period	(b) Recommended Amount	(c) Total Approved, Revised Budget Amounts	(d) Actual Expenditure Amounts
Personnel			\$0.00	
Fringe Benefit			\$0.00	
Travel			\$0.00	
Equipment			\$0.00	
Supplies			\$0.00	
Contractual			\$0.00	
Construction			\$0.00	
Other			\$0.00	
<b>Total Direct Costs (lines 1-8)</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Your data input accuracy result				Good Job
Indirect Costs			\$0.00	
Your data input accuracy result				Good Job
Training Stipends			\$0.00	
<b>Total Amounts (lines 9-11)</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Your data input accuracy result		Good Job		Good Job



## PERFORMANCE REPORT DATA FORM, BLOCK E/F (BUDGET)

The following two optional prompts can be found below the budget table.

1. Provide an explanation if you did not expend funds at the expected rate during the reporting period.
2. Additional Information

Provide responses to each if they apply or if you would like to provide further explanation or information.

## BLOCK E/F: REMINDERS

- Carryover cannot be negative. All carryover must equal the total amount that you are carrying over from the previous budget year.
- The total recommended amount in column B must be equal to the annual award amount found in your GAN. This must match the total reported in Block A.
- The actual expenditures total must reflect the total amount that you spent in 2021-2022. This amount must match the total reported in the cover sheet, and it cannot exceed the total approved and revised budget amount that is automatically populated in the table.
- The indirect cost expenditure amount cannot exceed eight percent of the direct cost expenditure amount.

## IMPORTANT DATES

Due Dates:

**Grantees Submit APR: Wednesday, November 9, 2022**

OME Data-Evaluation Team/Program Officers review APRs for accuracy and completeness.

**November 2022 – February 2023**

**After First Review** OME Data-Evaluation Team provides feedback within an email to grantees.

**First Revised APR Submission** - Grantees must resubmit required performance data to OME during the First Revised Submission.

**Five business days after email.**

## SECOND REVIEW /REVISED APR SUBMISSION

OME Data-Evaluation Team / Program Officers review the revised APRs for accuracy and completeness.

January 2023

**After Second Review** OME Data-Evaluation Team provides feedback within an email to grantees.

February 2023

**Second Revised APR Submission**, Grantees must resubmit required performance data to OME during Second Revised Submission.

Five business days after email or contact.

## REMINDER: INTERIM PERFORMANCE REPORT (IPR) REPORTING PERIOD

- For new projects (FY22 cohort) and those projects that were notified of not making substantial progress for FY2020-21:
- The IPR Reporting Period is a 7-month period:
  - **July 1, 2022 – January 27, 2023**
- Due Date: Your final version of the IPR must be submitted by **Wednesday, February 8, 2023.**

# INTERIM PERFORMANCE REPORT (IPR) SUBMISSION PROCESS

## 2 Files

- 1 Performance Report Data Form (MS Excel)
  - 1 Cover Sheet Form (MS Word)
- Grantees will complete and email the FINAL versions of BOTH files as 2 attachments in one email to [hepcampAPR@ed.gov](mailto:hepcampAPR@ed.gov) by Wednesday, February 8, 2023 using the OME-provided naming conventions listed below. In the email subject line, please enter your PR # and institution name.
  - FY2022.PR #.Name of Institution.IPR Cover Sheet  
(Example: FY2022.S149A221234.Utopia.IPR Cover Sheet)
  - FY2022.PR #.Name of Institution.IPR Data Form  
(Example: FY2022.S149A221234.Utopia University.IPR Data Form)

**LASTLY...**

Please join us for *optional drop-in APR Office Hours!*

**Thursday, October 13, 1:00 – 3:00 PM EST**

More details to come via the HEPCAMP list serv!

# QUESTIONS



## HEP AND CAMP CONTACT INFORMATION

- Dr. Sandra Toro, HEP and CAMP Data and Evaluation Lead
  - [Sandra.Toro@ed.gov](mailto:Sandra.Toro@ed.gov)
- Jessica Stein, Program Officer
  - [Jessica.Stein@ed.gov](mailto:Jessica.Stein@ed.gov)
  - Dr. Millie Bentley-Memon, HEP and CAMP Group Leader
  - [Millicent.Bentley-Memon@ed.gov](mailto:Millicent.Bentley-Memon@ed.gov)
- Dylan Hart-Medina, HEP and CAMP Team Lead
  - [Dylan.Hart-Medina@ed.gov](mailto:Dylan.Hart-Medina@ed.gov)

**THANK YOU!**