

2022-2023 Annual Performance Report Webinar

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

Presenters:

Katrina Ballard, Data and Evaluation Subject Matter Expert

Jessica Stein, Program Officer

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.

**Office of Migrant Education
U.S. Department of Education**



Welcome and Reminders

- This webinar is being recorded.
- Slides have been shared via email, and we will send them again after the presentation.
- Because this is a webinar, video is disabled for participants.
- Please enter any questions in the chat.


Presentation Goals

- Review how to complete the fiscal year (FY) 2023 Annual Performance Report (APR) for the 2022-2023 reporting period.
- Review basic information regarding the 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 (FY23 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 2024.*

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)

<https://oese.ed.gov/offices/office-of-migrant-education>

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.

2023 APR Reporting Period

- The APR **Reporting Period** is aligned with the 12-month current budget period: **July 1, 2022 – June 30, 2023**
- **Note:** throughout the presentation, we use reporting period/budget period interchangeably. When we refer to the previous budget period, we are referring to 2021-2022.
- Due Date: Your final version of the APR must be submitted to hepcampAPR@ed.gov by **Thursday, November 9, 2023.**

APR Files

- OME sent a message on Wednesday, August 9, 2023 on the HEP/CAMP listserv and a G5 blast on Friday, September 8, 2023.

Please email Katrina Ballard or Jessica Stein at
hepcampAPR@ed.gov
if you did not receive the following:

- File 1: Cover Sheet (MS Word)
- File 2: Performance Report Data Form (MS Excel)
- File 3: Optional Grantee Student Workbook (MS Excel)
- File 4: Instructions (PDF).

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>
Cover Sheet	Text/Signature	MS Word	PDF
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

Optional Grantee Student Workbook (Resource)

[illegible]

Optional Grantee Student Workbook (Resource)

APR #	Data Theme	
Block A	<i>Project Directory/Enrollment</i>	
A.1.b	Total Enrollment	0
A.1.b.1	# of New Students	0
A.1.b.2	# Returning Students	0
A.2.a	# of Completers	0
A.2.b	# of Withdrawals	0
A.2.c	# of Persisters	0
	<i>Postsecondary Status</i>	
A.3.a	# Continued in Postsecondary education	0
A.4	# Contacted for Follow-up after completing 1st year of college	0
A.5.a	# Graduated - Bachelors (For 2-Year IHEs)	0
A.5.b	# Graduated - Bachelors (For 4-Year IHEs)	0
A.6	# Graduated - AA	0
A.7	# Transferred to another IHE	0
A.8.a	# First Academic Year Completed within one calendar year in your project.	0
A.8.b	# First Academic Year Completed after more than one year, but within two calendar years in your project	0
A.8.c	# First Academic Year Completed after more than two calendar years in your project	1
Block B	<i>Supportive and Instructional Services Received</i>	
B.1.a.1	# Counseling or guidance services	0
B.1.a.2	# Tutoring(additional instructional services provided in support of a specific curriculum,course, or course of study).	0
B.1.a.3	# Other	0

Personally Identifiable Information (PII)

- Do not submit the optional grantee student workbook to the OME.
- This workbook contains PII – that is, a FERPA term referring to identifiable information that is maintained in education records and includes direct identifiers, such as a student's name or identification number, indirect identifiers, such as a student's date of birth, or other information which can be used to distinguish or trace an individual's identity either directly or indirectly through linkages with other information.
- When submitting reports or emails to the OME, please do not submit PII. Please redact PII or provide broad details about students, such as general descriptions, aggregated student data, or summaries.

Block A Terms

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

HEP DEFINITIONS

Number Funded to be Served (HEP)

- Number of students funded to be served by the HEP grant in the approved application.
- Can serve more students than the number for which you are funded.
- Generally cannot be amended or changed.
- If grantee serves fewer students than the number funded, Performance Measure 1 is calculated using the number funded to be served.

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.
- If grantees serve more students than the number funded to be served, Performance Measure 1 is calculated using the number served.

New Participants (HEP)

- Participants who were new to the project.
 - A subset of the number served.
 - Completed intake and were enrolled and attending HSE instruction for at least 12 hours in the current reporting period.
- Students who participated in HEP services during budget periods other than the immediately previous budget period are considered “New Participants.”
 - Includes students who participated in HEP services in the immediately previous budget period but were not counted as persisters for that budget period because they did not enroll in HEP services for the current budget period until after the previous APR due date.

Returning Participants (HEP)

- Completed intake but did not attain an HSE in the budget period immediately previous to the one being reported.
- Were enrolled and attending HSE instruction for at least 12 hours in current budget period before the APR due date.
- **The previous reporting period's persisters are the current year's returning students.**

Persisters (HEP)

- Completed intake and were enrolled and attending HEP HSE instruction for at least 12 hours in the current budget period but did not attain an HSE, but either:
 - Re-enrolled for continuing instructional services in support of a HSE in the subsequent budget period prior to the APR submission due date.
 - Or re-enrolled for the sole purpose of taking the HSE assessment in the subsequent budget period prior to the APR submission due date.
- **The current reporting period's persisters are the next reporting period's returning students.**

Attainers (HEP)

- HEP students who received an HSE certificate by the end of the reporting period
- Projects maintain a database of the students enrolled:
 - Identifying those students who attain an HSE
 - The date of HSE attainment (the actual date that the student took the last HSE exam), and
 - The HSE Credential or Identification Number.
- Returning students who do not complete HSE coursework, but do attain an HSE, are counted as attainers.

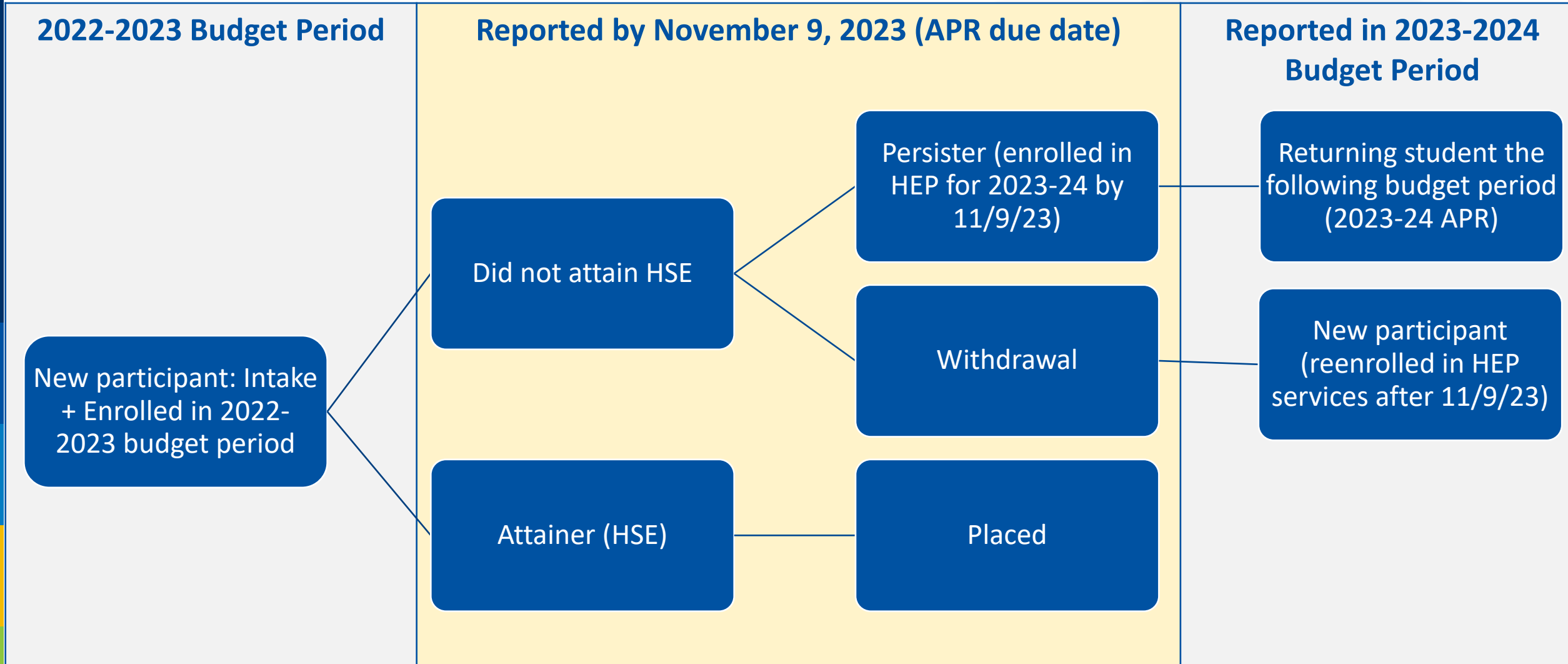
Placed (HEP)

- Of those who attained a HSE in the current reporting period, the number who entered:
 - postsecondary education or training programs,
 - upgraded employment,
 - or the military.
- **Note:** Count each student only **once**.
- Captured any time after the HSE is attained but before the APR due date for that reporting period.
- Actual placement, not anticipated.

Withdrawals (HEP)

- Number of served HEP students who completed intake and were enrolled and attending HEP HSE instruction for at least 12 hours in the current reporting period and:
 - Left the HEP project without attaining and HSE or
 - Did not return for instruction in the subsequent budget period prior to the APR due date.

Review: HEP definitions



Quiz

- Ana completed intake in 2021-2022 (the budget period immediately before the one being reported). She did not attain her HSE and was reported as a persister in 2021-2022.
- In September 2022 (the current budget period), she enrolled in and attended HEP instruction. The APR for that reporting period was Nov. 9, 2022.
- How should Ana be counted in the 2022-2023 budget period?

CAMP DEFINITIONS

Number Funded to be Served (CAMP)

- Number of students funded to be served by the CAMP grant in the approved application.
- Can serve more students than the number for which you are funded.
- Generally cannot be amended or changed.
- If grantee serves fewer students than the number funded, Performance Measure 1 is calculated using the number funded to be served.

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).
- If grantees serve more students than the number funded to be served, Performance Measure 1 is calculated using the number served.

New Participants (CAMP)

- Participants who were new to the project.
 - A subset of the number served.
 - Completed intake, enrolled full-time, and attending college past the date when students can no longer add/drop courses, or a census date.
- Students who participated in CAMP services during budget periods other than the immediately previous budget period are considered “New Participants.”
 - Students who were served in the immediately previous budget period and returned during the current reporting period but were not counted as persisters because they enrolled **after the APR due date** would be considered a new student.

Returning Participants (CAMP)

- CAMP first academic year college students who:
 - Completed intake in the budget period immediately before the one being reported
 - Did not complete the first academic year of college in the previous budget period, and
 - Were enrolled and attending CAMP instruction full-time past the add/drop date during the current budget period before APR due date.
- **The previous reporting period's persisters are the current year's returning students.**

Persisters (CAMP)

- Re-enrolled for completing their first academic year of postsecondary education in the subsequent budget period before the APR submission due date.
- They must remain enrolled past the date after which they can no longer add/drop courses, or a census date.
- **The current reporting period's persisters are the next reporting period's returning students.**

First Year Completers (CAMP)

- Must be enrolled at the institution of higher education 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.
- Please consult instructions regarding credits earned in high school and remedial coursework.

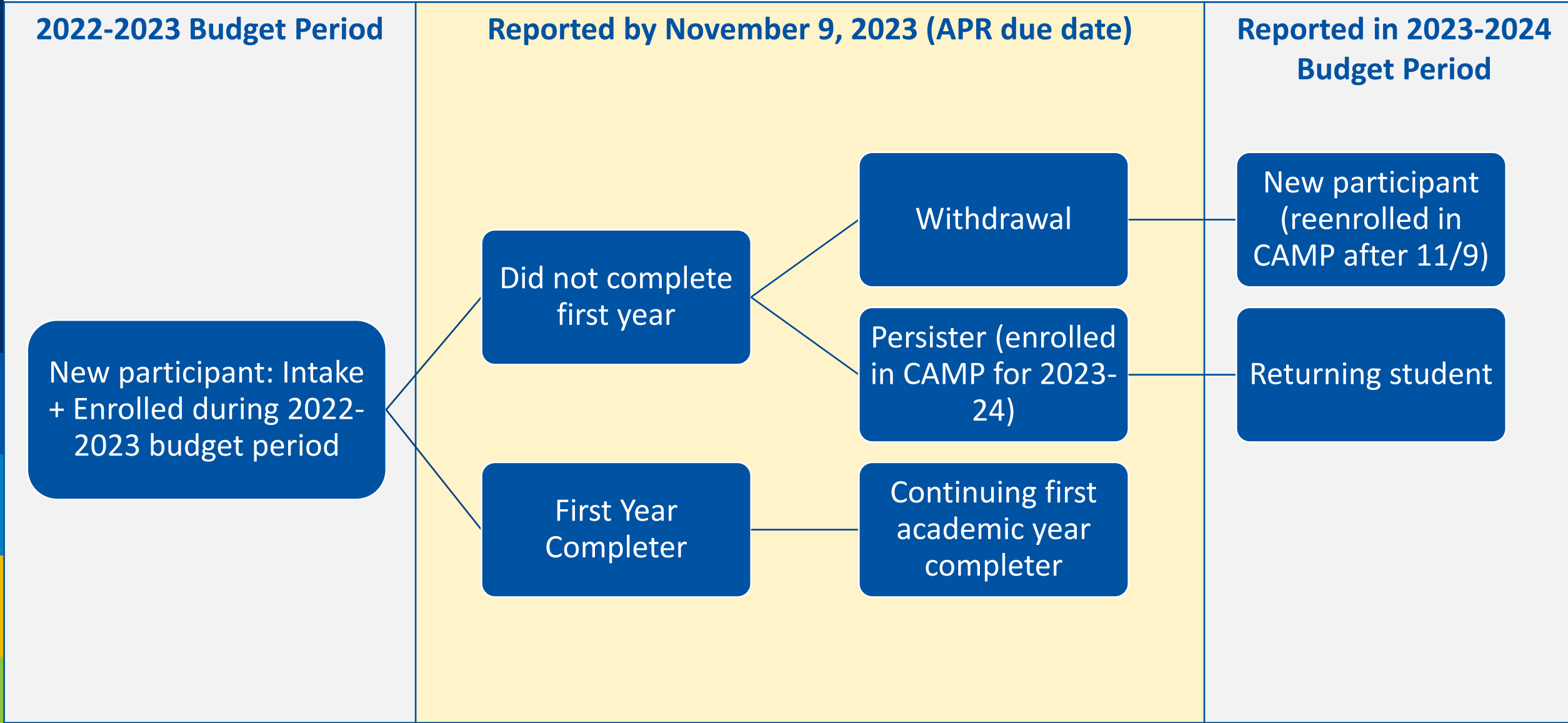
Continuing Students (CAMP)

- 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 (CAMP)

- Number of Served CAMP students who completed intake and were enrolled in and attending college courses past the IHE's add/drop date or census date, but:
 - Did not complete the first academic year of college and
 - Did not reenroll for instruction in the subsequent budget period by the APR due date.

Review: CAMP definitions



Quiz

- Jaime completed intake and was enrolled and attending college courses past the add/drop date during Spring 2023 (in the current reporting period).
- He did not complete his first academic year of college during the 2022-2023 reporting period. In August 2023, he reenrolled to continue completing his first year.
- How should Jaime be counted?

Quiz


- Alex completed intake, enrolled, and attended college courses two years ago but did not complete the program. They did not return to CAMP in 2021-2022 (the previously reported budget period).
- In September 2022 (the current reporting period), Alex completed intake again, enrolled, and attended college courses.
- How should Alex be counted?

QUESTIONS

2023 HEP AND CAMP APR FORMS

Cover Sheet

Grantee Name: _____	Grant Year: <input type="checkbox"/> Y1 <input type="checkbox"/> Y2 <input type="checkbox"/> Y3 <input type="checkbox"/> Y4 <input type="checkbox"/> Y5	PR Number: S14 _____
	Reporting Period: 07/01/2022 — 06/30/2023	



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

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 / 2022 To: 06 / 30 / 2023 (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>		
c. Entire Project Period (5-year) <small>(For Final Performance Reports only)</small>		

OMB No. 1810-0684
11/30/2024Cover SheetPage 1 of 2

Grantee Name: _____	Grant Year: <input type="checkbox"/> Y1 <input type="checkbox"/> Y2 <input type="checkbox"/> Y3 <input type="checkbox"/> Y4 <input type="checkbox"/> Y5	PR Number: S14 _____
	Reporting Period: 07/01/2022 — 06/30/2023	

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.

Title:

Name of Authorized Representative: _____

Date: ____ / ____ / ____

Signature: _____

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Cover Sheet

Grantee Name: _____

PR Number: S14 _____

Grant Year: ☐ Y1 ☐ Y2 ☐ Y3 ☐ Y4 ☐ Y5

Reporting Period: 07/01/2022 — 06/30/2023

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

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 / 2022 To: 06 / 30 / 2023 (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

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

Cover Sheet

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: _____

Date: / /

Cover Sheet

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: / /

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.

Your data input accuracy result	Pls check
Your data input accuracy result	Good Job

Performance Report Data Form, Block A

Grantee Name:		No Data
PR Number:		No Data
Grant Year:		No Data
Reporting Period	2022-2023	No Data
No Data	High School Equivalency Program U.S. Department of Education Annual Performance Report Data Form	No Data
A. HEP Project Statistics and Reporting for GPRA	No Data	No Data
Reporting Block, Item A1	Reporting Block A1 Item	Reporting Block A1 Response
A1.	Number of students served during the reporting period.	
A1.a.	Number funded to be served.	
A1.b.	Number served in HEP HSE instruction (note: A1b1 + A1b2 should sum to equal A1b).	
A1.b.1.	Number served who were new participants (first year in HEP) (subset of A1b).	0
A1.b.2.	Number served who were returning participants (subset of A1b).	
Reporting Block, Item A2	Reporting Block A2 Item	Reporting Block A2 Response
A2.	Status at the end of the reporting period. (Note: A2a-c should sum to equal the number reported in A1b(no. served)).	
A2.a.	Number of HSE attainers . (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	
A2.a.4.	Number of HSE attainers who passed the HSE assessment in the Spanish	
A2.a.5.	Number of HSE attainers who passed the HSE assessment in a language other than English or Spanish.	
A2.b.	Number of withdrawals .	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 persisters (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).	

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.	
Reporting Block, Item A5	Reporting Block A15 Item	Reporting Block A5 Response
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 within one reporting period of your project.	
A5.b.	Number of HSE attainers who got their HSE after more than one , but within two reporting periods of your project.	
A5.c.	Number of HSE attainers who got their HSE after more than two reporting periods of your project.	
	Your data input accuracy result	Good
Reporting Block, Item A6	Performance Calculation Table	No Data
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.

ACTIVITY

Activity

Instructions: Identify the three discrepancies in Block A of the CAMP APR Data Form below.

Note: According to the original application, the number funded to be served is 35 students. Last year, the grantee reported zero persisters.

Reporting Block, Item A1	Reporting Block A1 Item	Reporting Block A1 Response
A1.	Number of students served during the reporting period.	
A1.a.	Number funded to be served.	40
A1.b.	Number served in college courses (note: A1b1 + A1b2 should sum to equal A1b).	35
A1.b.1.	Number served who were new participants (first academic year in CAMP) (subset of A1b).	34
A1.b.2.	Number served who were returning participants (not first academic year in CAMP) (subset of A1b).	1
Reporting Block, Item A2	Reporting Block A2 Item	Reporting Block A2 Response
A2.	Status at the end of the reporting period. (Note: A2a-c should sum to equal the number reported in A1b (number served)).	
A2.a.	Number of CAMP first academic year completers . (Obj. 1 National Target: 86%) (GPRA 1) *Supporting documentation required. See instructions for item A2.	29
A2.b.	Number of withdrawals .	5
A2.c.	Number of persisters (came back to continue in the subsequent budget period; persisters were enrolled in instructional services in the current reporting period but did not yet complete their first academic year of college and have returned in the subsequent budget period to continue instructional services).	2

Solution

Note: According to the original application, the number funded to be served is 35 students. Last year, the grantee reported zero persisters.

Reporting Block, Item A1	Reporting Block A1 Item	Reporting Block A1 Response
A1.	Number of students served during the reporting period.	
A1.a.	Number funded to be served.	40
A1.b.	Number served in college courses (note: A1b1 + A1b2 should sum to equal A1b).	35
A1.b.1.	Number served who were new participants (first academic year in CAMP) (subset of A1b).	34
A1.b.2.	Number served who were returning participants (not first academic year in CAMP) (subset of A1b).	1
Reporting Block, Item A2	Reporting Block A2 Item	Reporting Block A2 Response
A2.	Status at the end of the reporting period. (Note: A2a-c should sum to equal the number reported in A1b (number served)).	
A2.a.	Number of CAMP first academic year completers . (Obj. 1 National Target: 86%) (GPRA 1) *Supporting documentation required. See instructions for item A2.	29
A2.b.	Number of withdrawals .	5
A2.c.	Number of persisters (came back to continue in the subsequent budget period; persisters were enrolled in instructional services in the current reporting period but did not yet complete their first academic year of college and have returned in the subsequent budget period to continue instructional services).	2
	Your data input accuracy result	Please check

Performance Report Data Form, Block B

B1	Supportive & instructional Services and Financial Services provided only by CAMP funds and received by CAMP-enrolled students during the reporting period. This count does not include any other services provided to CAMP students by the university or another entity.	
B1.a.	Count the total number of CAMP students served with the following types of supportive and instructional services. Students may appear in more than one row if they received more than one service. (Calculation of total hours received, etc. are not necessary).	
B1.a.1.	Counseling or guidance services to CAMP students (personal, academic, and career services provided in support of school-life balance and other psycho-social aspects of college completion).	
B1.a.2.	Tutoring (additional instructional services provided in support of a specific curriculum, course, or course of study).	
B1.a.3.	Other (supportive or instructional services, including health services, assistance with special admissions, or other services as necessary to assist students in completing program requirements).	
B1.b.	Count the total number of CAMP students serviced with the following types of financial services. Please indicate the number of students receiving financial support services. Students may appear in more than one row if they received more than one service.	
B1.b.1.	Stipends.	
B1.b.2.	Room and Board.	
B1.b.3.	career-oriented work study, books and supplies, and tuition and fees).	
Reporting Block, Item B2	Reporting Block B2 Item	Reporting Block B2 Response
B2	Characteristics of the CAMP enrolled students during this reporting period. (Note: [B2a and B2b] and [B2c and B2d] should sum to equal the number reported in A1b (number served)).	
B2.a.	Number of students who were referred from MEP and accepted into CAMP.	
B2.b.	Number of students who were referred from HEP and accepted into CAMP.	
B2.c.	Number of students who were referred from NFJP and accepted into CAMP.	
B2.d.	Number of students who were referred from any other program and accepted into CAMP.	
End of Spreadsheet	No Data	No Data

Performance Report Data Form, Block C (HEP)

Grantee Name:	<u>0</u>	No Data
PR Number:	<u>0</u>	No Data
C. HEP Project Services Information	No Data	No Data
Reporting Block, Item C1	Reporting Block C1 Item	Reporting Block C1 Response
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.)	
	Your data input accuracy result	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:
Reporting Block, Item C2	Reporting Block C2 Item	Reporting Block C2 Response
C2.	Project Student Assessment Information Related to this Reporting Period.	
a.	Which HSE assessment(s) does your project use?	Choose one:
End of Spreadsheet	No Data	No Data

Choose the HSE

Performance Report Data Form, Block C (CAMP)

Grantee Name:	0	No Data
PR Number:	0	No Data
C. CAMP Project Services Information	No Data	No Data
Reporting Block, Item C1	Reporting Block C1 Item	Reporting Block C1 Response
C1.	Project Model Characteristics during the Reporting Period	
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.)	
	Your data input accuracy result	Good Job
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:
Reporting Block, Item C2	Reporting Block C2 Item	Reporting Block C2 Response
C2.	Test Information Collected during the Reporting Period	
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)	

Performance Report Data Form, Block D

Grantee Name:	0
PR Number:	0
D. HEP Project Goals and Objectives	Project Performance Objective Information
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).
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 2022 -2023 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>

Performance Report Data Form, Block D – 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.

Performance Report Data Form, Block E/F (Budget)

Budget Category Numbers	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
1	Personnel			\$0.00	
2	Fringe Benefit			\$0.00	
3	Travel			\$0.00	
4	Equipment			\$0.00	
5	Supplies			\$0.00	
6	Contractual			\$0.00	
7	Construction			\$0.00	
8	Other			\$0.00	
9	Total Direct Costs (lines 1-8)	\$0.00	\$0.00	\$0.00	\$0.00
No Data	Your data input accuracy result				Good Job
10	Indirect Costs			\$0.00	
	Your data input accuracy result				Good Job
11	Training Stipends			\$0.00	
12	Total Amounts (lines 9-11)	\$0.00	\$0.00	\$0.00	\$0.00
No Data	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.

IMPORTANT DATES

Important Dates

Due Dates:

Grantees Submit APR: Thursday, November 9, 2023

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

November 2023 – February 2024

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 2024

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

February 2024

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

Five business days after email or contact.

INTERIM PERFORMANCE REPORT

INTERIM PERFORMANCE REPORT (IPR) REPORTING PERIOD

For new projects (FY23 cohort) and those projects that were notified by OME in spring 2023 that their project did not make substantial progress for FY2021-22:

- The IPR Reporting Period is a 7-month period: **July 1, 2023 – January 26, 2024**
- Due Date: Your final version of the IPR must be submitted by **Thursday, February 8, 2024.**

Submission Process

1
Performance
Report Data
Form (MS
Excel)



1 Cover
Sheet Form
(PDF)



Two attachments in
one email to:
hepcampAPR@ed.gov

APR Submission Process

- In the email subject line, please enter your PR # and institution name.
- **Cover Sheet:** PR #.Name of Institution.2023 APR Cover Sheet
 - *Example:* S149A221234.UtopiaUniversity.2023 APR Cover Sheet
- **Data Form:** PR #.Name of Institution.2023 APR Data Form
 - *Example:* S149A221234.UtopiaUniversity.2023 APR Data Form

APR OFFICE Hours

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

Wednesday, October 11 (12:30 – 2:30 PM ET)

More details to come via the HEPCAMP list serv!

QUESTIONS

Cover Sheet Recap

Reminders

Check the grant year at the top of the first page. It should cover the reporting period, 7/1/2022 to 6/30/2023. If it does not, you are using an older version of the form.

Enter the 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.

Data Form Recap

Block	Reminders
All Blocks	<ul style="list-style-type: none">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.Check for data accuracy, and do not leave applicable sections blank.
A	<ul style="list-style-type: none">Update the header. Enter the correct grantee name and PR number, and select the correct grant year.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.
B	<ul style="list-style-type: none">Each student must be counted once in the CAMP referral data section.HEP instruction hours must be carefully tracked and reported accurately.
C	<ul style="list-style-type: none">Each student must be counted once in the commuter and residential data section.CAMP directors need to collect institutional data to complete the score section.
D	<ul style="list-style-type: none">Each objective must 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).
E/F	<ul style="list-style-type: none">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 equal the annual award amount found in your GAN. This recommended amount must match the total reported in Block A.The actual expenditures total must reflect the total amount that you spent in 2022-2023. 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.

HEP and CAMP Contact Information

- Katrina Ballard, HEP and CAMP Data and Evaluation SME
 - Katrina.Ballard@ed.gov
- Jessica Stein, Program Officer
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- Dr. Millie Bentley-Memon, HEP and CAMP Group Leader
 - Millicent.Bentley-Memon@ed.gov
- Dylan Hart-Medina, HEP and CAMP Team Lead
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THANK YOU!