



(Check One)

Interim Report (Due 9/1/17)

Final Report (Due 8/1/18)

Form with two empty boxes for reporting status

I – FISCAL REPORT – to be completed by the appropriate University Fiscal Officer

1. General Information

Date Submitted

- a) Grant Number 16-
b) Name of Institution
c) Mailing Address
d) Project Title
e) Project Director(s) Title(s) Phone Mobile

2. Fiscal Information

- a) Grant Award \$
b) Payments Received to Date
c) Category Expenditures to Date
1. PERSONNEL COSTS
A. Salaries – Key Personnel
B. Benefits – Key Personnel
C. Salaries – Support Personnel
D. Benefits – Support Personnel
2. PARTICIPANT TUITION & FEES
A. Tuition
B. Fees
3. PARTICIPANT COSTS
A. Teacher Stipends
B. Teacher Substitutes
C. Lodging
D. Travel
E. Books & Instructional Materials
F. Other Participant Costs
4. CONTRACTUAL/CONSULTANTS
5. OTHER TRAVEL
6. SUPPLIES & MATERIALS – PROGRAM
A. Materials to Deliver Program
B. Other
7. EQUIPMENT TO DELIVER PROGRAM
8. SERVICES
9. OTHER (please list)
10. INDIRECT COSTS (8% of the subtotal)
d) Total Expenditure to Date (c1 through c10)
e) Balance of Unexpended Funds (a minus d)
f) FINAL REPORT ONLY – Amount to be returned to Ohio Department of Higher Education (b minus d, if positive)

3. Cost Share Certification (Final Report Only)

Itemize all cost sharing (including amount) on a separate sheet.



(Check One)

Interim Report (Due 9/1/17)

Final Report (Due 8/1/18)

<input type="checkbox"/>
<input type="checkbox"/>

II – PROJECT REPORT – to be completed by the Project Director

1. General Information

Date Submitted _____

- a) Grant Number 16- _____
- b) Name of Institution _____
- c) Mailing Address _____
- _____
- d) Project Title _____
- e) Project Director(s) _____
- Title(s) _____ Phone _____ Cell _____

2. Project Staff

List all professional personnel involved in conducting the project and related information. Use additional lines if necessary.

Staff Member	Title & Discipline	Responsibility	% Time on the Project

3. Project Operation

PLEASE SUBMIT 3a – 3g WITH BOTH THE INTERIM AND FINAL REPORTS.

Use the headings provided below to describe your program. Please include the Project Number, Institution and Project Director(s) name at the top of each page of your document.

- a) Describe major accomplishments.
- b) Describe internal evaluation used to measure the success of the participants in the project activities and how that related to the project objectives. Identify project-developed or published instruments utilized. Include relevant baseline data.
- c) Describe internal evaluation used to measure PK-12 student learning outcomes as a result of their teacher’s participation. Identify project-developed, teacher-developed or published instruments utilized. Include relevant baseline data.
- d) Describe any changes from the original proposal (e.g., activities, audiences served) including the rationale for the changes.
- e) Describe administrative, programmatic or recruitment problems encountered and how they were resolved.
- f) Please provide any other related project information that you would like to share with the ITQ staff.
- g) Provide a detailed list of all participants. Include the following information: *(EXCEL spreadsheets)*
 - 1) Daily Participant Attendance/Time Sheets for all sessions (part of uniform guidance guidelines).
 - 2) Participant names and contact information, including email, phone and home address.
 - 3) Participant school district, school, grade level and subject area.
 - 4) Identification of participants from the High-Need LEA Principal Partner.

PLEASE SUBMIT 3h through 3p FOR FINAL REPORTS ONLY.

- h) Describe, with **supporting quantitative and qualitative evidence**, how your project impacted **participants' learning outcomes** in content knowledge, pedagogical knowledge and classroom practice. Include appropriate measures/data sources used and improvement over baseline data. (*Details of this section may be referenced in the external evaluator's report.*)
- i) Describe, with **supporting quantitative and qualitative evidence**, how your project impacted **PK-12 student learning outcomes** as the result of their teacher's participation in the ITQ program. Include appropriate measures/data sources used and improvement over baseline data. Include student achievement on focus content through State assessments or valid and reliable student tests administered by the teacher or school. (*Details of this section may be referenced in the external evaluator's report.*)
- j) Provide a one-page maximum sample of participants' comments about their:
 - 1) experience in the project;
 - 2) use of activities and/or strategies learned in the project with their students; and
 - 3) students' performance and involvement as a result of their participation in the project.(*Details of this section may be placed in the external evaluator's report.*)
- k) Identify all activities (ex: summer institute, online learning community, face-to-face follow-up, classroom observations, after school meetings), including the following information for each activity: (*table format*)
 - 1) date and location of activity,
 - 2) number of participants in attendance,
 - 3) contact hours, and
 - 4) content focus.
- l) Describe any replication of exemplary features and/or dissemination of results that occurred.
- m) Describe any unexpected project outcomes.
- n) If publicity regarding activities and/or accomplishments occurred, please include samples.
- o) Summarize changes you would make if you were repeating this project.
- p) Please submit a copy of the external evaluator's project evaluation report.
- q) List all cost sharing, including monetary contributions and/or use of additional resources from LEAs (school districts), universities and organizations.

Please submit electronically one copy of this report in WORD or PDF format to:

Dr. Alexis Collier

ACollier@highered.ohio.gov

**In the email subject line, please include the
Project Number (FY16-xx), Project Director's name and Project Title**