

# TITLE III ANNUAL PERFORMANCE REPORT (12MONTH)

<b>Date</b>	Click here to enter a date.
<b>Activity Director</b>	
<b>Activity Name</b>	
<b>Grant Year</b>	2017-2018 <input type="checkbox"/> Title III-B <input type="checkbox"/> SAFRA
<b>Reporting Period</b>	October 1, 2017 – September 31, 2018
<b>PLEASE REFER TO YOUR SEMI-ANNUAL (6 MONTH) REPORT AS A REFERENCE.</b>	
<b>PART I: OBJECTIVE STATUS</b>	
Continued funding requires evidence of substantial progress towards meeting your activity objectives. <b>Please list your objectives for each activity carried out this reporting period.</b>	
<b>Objective #1:</b>	<b>Status of Objective #1:</b>
<b>Objective #2:</b>	<b>Status of Objective #2:</b>
<b>Objective #3:</b>	<b>Status of Objective #3:</b>
<b>Objective #4:</b>	<b>Status of Objective #4:</b>
<b>Objective #5:</b>	<b>Status of Objective #5:</b>
<b>Describe any challenges encountered in achieving the objectives of this activity.</b>	
<b>PART II: PROJECT SUMMARY</b>	
Please summarize the progress made during the current period.	
What were the specified outcomes for the activity and what is the status of accomplishment?	
What key processes, procedures, and activities contributed to the specified observable outcomes?	
Were resources adequate during this period?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
What resource (or lack thereof), including the quantitative and qualitative characteristics of people, funding, equipment, supplies, training, preliminary plans, strategies, etc., contributed to activity outcomes?	
What impact did the activity have on the Institution?	
How was the prior performance report used to enhance activity outcomes during this period?	

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<b>PART III: UNIVERSITY COLLABORATIONS</b>	
Provide any update on collaboration efforts of your activity with other college services.	
<b>PART IV: TITLE III PERSONNEL</b>	
List all Title III Personnel, and include any changes in personnel during this current grant/activity year.	
<b>PART V: BUDGET ANALYSIS</b>	
Please refer to your budget statements	
What is the 2017-2018 grant year award amount for your activity?	\$
What is the total amount of expenses for your activity during the 2017-2018 grant year?	\$
What is the available balance of your activity (unspent funds)?	\$
<b>PART VI: TRAVEL</b>	
Please list all travel relative to your objectives, and include the following:	
Name of Event	Attendee(s), Date(s) of Event, and Location, etc.
1.	
2.	
3.	
<b>PART VII: ACTIVITY MANAGEMENT AND DOCUMENTATION</b>	
Please respond to the following	
Are all Time and Efforts completed, submitted and up-to-date in the Title III office? If no, provide a detailed explanation.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has all the equipment for your activity been tagged, logged and filed in the Information Technology office? If no, provide a detailed explanation.	<input type="checkbox"/> Yes <input type="checkbox"/> No
List the supporting documentation on file in your department that substantiates the achievement covering this period:	

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**PART VIII: IMPACT**

Describe the impact of your activity upon the Title III focus area for your activity. Please be very detailed. The information provided in this report will be also be used for the DOE Interim and Annual Performance Report.

**Note: This section is Mandatory**

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