SAE Apprenticeship Grant Reports

Please check the report you are submitting.

Second Report (covers July 1 – February 28) – Due on or Before March 15

Third/Final Report (covers entire grant period) – Due on or Before July 15

Date of current report:

Number to be Served (from grant application):

Amount of Award: $

Directions: When required to submit multiple reports for a grant, simply use the same report template and complete the next report section each time you submit. All reports are to be uploaded to the Apply Portal.

Text

Description automatically generated with low confidence

Second Report (covers July 1 – February 28) – Due on or Before March 15

|  |  |
| --- | --- |
| **Person completing report, name, email, phone:** |  |

|  |  |
| --- | --- |
| 1. **Goals/Activities**  * List Goal/activity number * List Activity description * Describe the status of each activity. Include client numbers served and any changes planned for the activity if available | |
| **Goal/Activity Number** |  |
| **Activity Description** |  |
| **Activity Status** |  |
| **Goal/Activity Number** |  |
| **Activity Description** |  |
| **Activity Status** |  |
| **Goal/Activity Number** |  |
| **Activity Description** |  |
| **Activity Status** |  |
| **Goal/Activity Number** |  |
| **Activity Description** |  |
| **Activity Status** |  |

|  |  |
| --- | --- |
| 1. **If you are anticipating any revisions to the grant based on changes to activities; state the reason and nature of revision.** | |
| **Goal/Activity Number** | **Description and date of anticipated revision** |
|  |  |

Please upload completed report to the Apply Portal for Second Report

**Final Report (covers entire grant period) – Due on or Before July 15**

|  |  |
| --- | --- |
| **Person completing report, name, email, phone:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grant applications must state that curriculum developed with funding will be developed in WIDS and will be shared via posting at** [**https://wtcsystem.wids.org**](https://wtcsystem.wids.org)**. In accordance with grant requirements, approved curriculum deliverables must be posted to the WTCS WIDS Repository for use by all WTCS colleges or grant conditions will not have been met. For each course posted, include the grant number, without dashes, in the course description.** | | | | **Posted in the Repository?**  **(Please indicate with an ‘x’ below)**  **Yes**   **No**   **N/A** |
| Evaluation | | | | |
| **In this section, tell us what happened:** | | | | |
| **What went well?**   * **How do you know it was successful?** * **What supportive data do you have?** * **What are the promising or best practices that emerged?** | | | **What challenges did you face?**   * **What activities challenged you and why?** * **How did you resolve them?** * **What will you do differently next time?** * **What supportive data do you have?** | |
| **Measurable Objective** |  | | |
| Measurable Objective Met | **Yes**   **No or Partially Met** | | |
| What Happened |  | | |
| What’s Next |  | | |
| **Measurable Objective** |  | | |
| Measurable Objective Met | **Yes**   **No or Partially Met** | | |
| What Happened |  | | |
| What’s Next |  | | |
| **Measurable Objective** |  | | |
| Measurable Objective Met | **Yes**   **No or Partially Met** | | |
| What Happened |  | | |
| What’s Next |  | | |

Please upload completed report to the Apply Portal for Final Report