# Perkins IV Final Narrative Report: Program Year 2018-19

# Major Effort Identification

Complete a final narrative report for each Perkins-funded Major Effort in 2018-19

|  |  |  |  |
| --- | --- | --- | --- |
| Agency |       | Project number |       |
| Contact person |       | Telephone number |       |
| E-mail address |       | Fax number |       |
| Major effort title |       | Major effort number  |    of     |
|  |  |  |  |

**Mandated Activities**

**Final amounts must represent *actual* expenditures.**

|  |  |
| --- | --- |
| Mandated Activities | Expenditure |
| Strengthen the academic and career skills of students participating in CTE through integration | $      |
| Provide students with strong experience in and understanding of all aspects of an industry | $      |
| Develop, improve or expand the use of technology in CTE | $      |
| Provide professional development programs to teachers, counselors, and administrators | $      |
| Develop and implement evaluations of CTE programs funded under Title I, including an assessment of how the needs of special populations needs are met | $      |
| Initiate, improve, expand, and modernize quality CTE Programs | $      |
| Provide services and activities that are of sufficient size, scope, and quality to be effective | $      |
| Link secondary CTE and postsecondary vocational-technical education | $      |
| Provide activities to prepare special populations for high skill, high wage or high demand fields  | $      |
| Major Effort total | $      |

# Special Populations

Expenditures by population for 2018-19: Enter the number of students served by population and actual expenditures. Each CTE student should be counted either as a general CTE student or a CTE student with disabilities. The total will be a non-duplicated count. Actual expenditure amounts must be given.

|  |  |  |
| --- | --- | --- |
| **Population** | **Number** | **Expenditure** |
| General CTE students |       | $      |
| CTE students with disabilities |       | $      |
| Total |       | $      |

Enter the number of students from the total above who are members of the following populations. This is a duplicated count. If a student meets the description of more than one population, add him or her to each count.

|  |  |  |
| --- | --- | --- |
| **Population** | **Number** | **Expenditure** |
| Economically disadvantaged/foster children |       | $      |
| Individuals preparing for nontraditional training and employment |       | $      |
| Single parent/single pregnant women |       | $      |
| Displaced homemaker |       | $      |
| English language learners |       | $      |

# Major Effort Evaluation

Quantitative Evaluation

Objectives of this Major Effort—Please copy and paste the “Evaluation Measure” and “Outcomes” used in your 2018-19 application forms:

|  |  |  |
| --- | --- | --- |
| **Evaluation Measure** | **Projected Outcome** | **Actual Outcome**  |
|       |       | [ ]  Met objective[ ]  did not meet objective, please explain**:**      |
|       |       | [ ]  Met objective[ ]  did not meet objective, please explain**:**      |
|       |       | [ ]  Met objective[ ]  did not meet objective, please explain**:**      |
|       |       | [ ]  Met objective[ ]  did not meet objective, please explain**:**      |
|       |       | [ ]  Met objective[ ]  did not meet objective, please explain**:**      |

Activities carried out to achieve the objectives:

Evaluate this Major Effort by providing additional outcome data, including the results of any exit surveys of students who have participated in the effort, completions rates, increase in pass rate of technical skills assessment, etc.

How did this project benefit students and improve programs?

|  |
| --- |
| **Certification** |
| I hereby certify that I am the applicant’s chief school/administrative officer and that the information contained in this application is, to the best of my knowledge, complete and accurate. It is also understood by the applicant that immediate written notice will be provided to the grant program office if at any time the applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.  |
|       |
| Superintendent/District Superintendent’s Signature (in blue ink)      | Date      |
| Printed name |

Completed forms are due by September 30, 2019. Late submission of the Final Narratives can result in a delay in the release of funds. Send forms to:

State Education Department

Career & Technical Education, Room 315 EB

Perkins Final Reports

89 Washington Avenue

Albany, NY 12234