



<b>Program:</b> GPA <b>Project:</b> <b>Award #:</b> <b>Project Director:</b> <b>World Area:</b>	<b>Grant Start Date:</b> <b>Grant End Date:</b> <b>Final Report Due Date:</b> <b>Amount:</b> \$ 0	<b>Current Report Information</b> <b>Start Date:</b> <b>End Date:</b> <b>Due Date:</b> <b>Submit Date:</b> <b>Amount:</b> \$0
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## Project Information

Review and edit the project information and contact information for the project director. To change the name or email of your project director, contact your program officer for assistance.

\* Required fields

Name:

Title:

Street: \*

Street 2:

City: \*

State:  ▼

Postal code: \*

Phone: \*

Fax:

Email:

Web address:

Home institution:

Project title: \*

World area:

Program officer: ()

These items are populated from your fellows' information.

■ Languages \*

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■ Countries \*

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■ Disciplines \*

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## Additional Users

To add a user with permission to edit reports for this project, enter the person's first name, last name and email address. The system will email login information to each added user.

To remove a user, clear the fields and click "Save."

\* Required fields

First Name *	Last Name *	Title	Phone	Email *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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International Education Programs Service  
U.S. Department of Education  
Office of Postsecondary Education  
1990 K Street, N.W., Washington, DC 20006-8521  
Phone: (202) 502-7700



**Participant's Departure Itinerary** (Required for international travel)

Departure Date (mm/dd/yyyy)	From City	From State or Country	Arrival Date (mm/dd/yyyy)	To City	To State or Country	Airline and Flight Number

**Participant's Return Itinerary**

Departure Date (mm/dd/yyyy)	From City	From State or Country	Arrival Date (mm/dd/yyyy)	To City	To State or Country	Airline and Flight Number

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Pre-Seminar Screens:	<a href="#">Participant Administration</a>	<a href="#">Project Overview</a>
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## Add a Participant

Enter the following information about each participant, **including project administrators**.

\* Required fields

Participant name: \*    
First name Last name

Email: \*

Position title: \*

Institution or Employer: \*

Other: (If institution not in dropdown)

Street address: \*

City: \*

State:

Country: \*

Postal code:

Participant type: \*

Specialty: \*

Has the individual previously participated in a Fulbright-Hays Seminars or Group Projects Abroad project? \*

Yes  No

If so, for what year(s) and country(ies)?

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Post-Seminar Screens	Orientation Evaluation	In-Country Activities	In-Country Experience Eval	Sources of Funding	Outreach Activities	Budget

## Pre-Departure Preparation and Orientation Evaluation

Evaluate the pre-departure orientation. Describe any exemplary activities and note areas for improvement.

Include the following categories, if applicable:

- Language instruction;
- Delivery of the information in the orientation, including pacing and appropriateness;
- Cultural sensitivity of program coordinators;
- Adequacy of preparation to make participants feel comfortable and ready to travel; and
- Overall preparation for the orientation.

\* Required fields

Exemplary activities: \* (limit 4,000 characters and spaces)

Areas for improvement: \* (limit 4,000 characters and spaces)

**Save**

**Save and Continue**

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## In-Country Activities

Indicate the number of each of the following in-country activities conducted. Explain any differences between the proposed and the actual activities.

Category	Total Number
Lectures	<input type="text"/>
Site visits	<input type="text"/>
Cultural activities	<input type="text"/>
Hours of free time	<input type="text"/>
Contacts with host-country counterparts	<input type="text"/>
Group debriefings	<input type="text"/>
Language sessions	<input type="text"/>

Explain any differences between the actual activities and the proposed itinerary. (limit 500 characters and spaces)

Save

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## In-Country Experience Evaluation

Evaluate the in-country experience. Describe any exemplary activities and note areas for improvement. Include the following categories, if applicable:

- Condition of housing facilities;
- Quality of food and dining services;
- Condition of meeting facilities;
- Quality of host country faculty and teachers;
- Quality of other host country counterparts;
- Quality and value of interaction with other program participants;
- Quality of service provided by host country administering agencies;
- Time scheduling and itinerary;
- Pacing of itinerary; and
- Ability to meet the special needs of participants.

\* Required Fields

Exemplary activities: \* (limit 4,000 characters and spaces)

Areas for improvement: \* (limit 4,000 characters and spaces)

**Save**

**Save and Continue**

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## Sources of Funding

Provide the following information about the funding support for the project. Totals will be automatically calculated.

\* Required fields

Was the Fulbright-Hays GPA funding adequate to complete the project as planned? \*  Yes  No

### Federal Funding

Did the project receive federal funding in addition to the Fulbright-Hays GPA grant? \*  Yes  No

Total amount of other federal funding: \$

Source of other federal funding:

### Non-Federal Funding

Did the project receive non-federal funding? \*  Yes  No

Participant cost-sharing per person: \$

Total participant cost-sharing: \$

School district cost-sharing: \$

Institution cost-sharing: \$

Non-profit organization(s) cost-sharing: \$

Total non-federal funding: \$

Total amount of all other federal and non-federal funding: \$

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## Outreach Activities

Enter information for each outreach activity you completed or planned as a result of your participation in the program. Include activities such as conference presentations, teacher workshops, media interviews and articles.

\* Required fields

Type of activity: \*

Title of activity: \*

Target audience: \*   
Business  
Business executives  
Community organization

(for multiple selections, hold down the "ctrl" or "apple" key and click)

State:

Country: \*

Is this a completed or planned activity? \*  Completed  Planned

Total attendance:

Comments: (limit 1,000 characters and spaces)

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## Budget

For each category, enter the amount of Fulbright-Hays GPA funds expended during the grant period. Totals will be automatically calculated.

\* Required fields

Budget Category	Fulbright-Hays GPA Funds Spent in the Current Reporting Period
Personnel	\$ <input type="text" value="0"/>
Fringe Benefits	\$ <input type="text" value="0"/>
Travel	\$ <input type="text" value="0"/>
Equipment	\$ <input type="text" value="0"/>
Supplies	\$ <input type="text" value="0"/>
Contractual	\$ <input type="text" value="0"/>
Other	\$ <input type="text" value="0"/>
<b>Total Direct Costs</b>	\$ <input type="text" value="0"/>
<b>Total Indirect Costs</b> (may not exceed 8% of direct costs)	\$ <input type="text" value="0"/>
<b>Total Budget</b>	\$ <input type="text" value="0"/>

Comments: (limit 1,000 characters and spaces)

**Budget attachment:** \* Excel spreadsheet only. Attach a spreadsheet with detailed budget information.  
 (Note: The file must have a .xls extension and may not contain any of the following characters: - : / \ \* ? " < > |).

(Click the "Browse..." button to attach an electronic copy of the project budget. When prompted, locate and select the budget file. Only one spreadsheet may be attached to this report. Uploading a document replaces the document previously attached.)

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