

# SCHOOL PROGRAM EVALUATION REPORT - LIST OF DATA FIELDS

**DCI Number/Fiscal Year:**

432409 (2018-2019)

**Purpose:**

As per funding agreement

**Reporting Period:**

As per funding agreement

**Due Date:**

As per funding agreement

**Legend:**

- Auto-Calc: Automatically calculated field.
- Auto-Fill: Automatically filled field.
- Mandatory: Field must be completed by recipient to reduce potential delays in processing as Regional Office staff may need to contact recipients for incomplete reports.
- Pre-Populated: Data field is Pre-Populated with information contained in the proposal submitted to the department.
- Roll-Over: Data that has been rolled-over from the previous years' submitted report.

**REPORT IDENTIFICATION**

This section of the form is used for identification and tracking purposes. The fiscal year and reporting period are automatically filled with the relevant information.

Fiscal Year (Auto-Fill)	This field defaults to the fiscal year for which you are reporting.
Period (Auto-Fill and Mandatory)	The time period on which you are reporting.

**ORGANIZATION IDENTIFICATION**

This section is used to identify the organization completing the School Program Evaluation Report.

Recipient Number (Mandatory)	The recipient ID number as assigned by INAC. Important: Make sure to enter a 4-digit number. Add zeroes (0) in front if necessary.
Recipient Name (Mandatory)	The official name of the Recipient of INAC funds.
Organization Type (Mandatory)	A dropdown list of possible organizations that could complete a Report.
Organization Name (Mandatory)	The official name of your organization. This field is automatically populated when you enter the Organization No. in the next field and vice versa.

Organization Number (Mandatory)	The official number of your organization. Some Organization Types do not require an Organization Number.
Telephone Number (Mandatory)	The organization's telephone number.
Extension Number	The extension number, if applicable.
Fax Number	The organization's facsimile number.
Email Address	The e-mail address of the organization, if available.
Web site	The home page URL for the organization's web site.

**Mailing Address**

<ul style="list-style-type: none"> <li>- Number/Street/ Apartment/P.O. Box</li> <li>- City/Town</li> <li>- Province or Territory</li> <li>- Country</li> <li>- Postal Code</li> </ul> (Mandatory)	The address or P.O. Box at which the party can be reached by mail.
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**CONTACTS**

**Primary Contact**

The Primary Contact is the person who is responsible for the DCI when completed. The Secondary Contact is the back-up contact in case the Primary Contact is unavailable.

Given Name (Mandatory)	The given name or first name.
Family Name (Mandatory)	The family name or surname.
Title/Position (Mandatory)	The contact's job title or position.
Telephone No. (Mandatory)	The contact's telephone number.
Extension Number	The extension number, if applicable.
Fax Number	The contact's facsimile number, if available.
E-mail Address	The e-mail address of the contact, if available.

**Mailing Address**

<ul style="list-style-type: none"> <li>- Number/Street/ Apartment/P.O. Box</li> <li>- City/Town</li> <li>- Province or Territory</li> <li>- Country</li> <li>- Postal Code</li> </ul> (Mandatory)	The address or P.O. Box at which the party can be reached by mail.
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**Street Address**

<ul style="list-style-type: none"> <li>- Number/Street/ Apartment/P.O. Box</li> <li>- City/Town</li> <li>- Province or Territory (Country)</li> <li>- Postal Code</li> </ul> (Mandatory)	The address or at which the party can be reached.
<b>Secondary Contact Information</b>	
Do you want to specify a secondary contact?	Yes or No - if Yes is selected, the same fields are mandatory as the Primary Contact.
Given Name (Mandatory)	The given name or first name.
Family Name (Mandatory)	The family name or surname.
Title/Position (Mandatory)	The contact's job title or position.
Telephone Number (Mandatory)	The contact's telephone number.
Extension Number	The extension number, if applicable.
Fax Number	The contact's facsimile number, if available.
E-mail Address	The e-mail address of the contact, if available.
<b>Mailing Address</b>	
<ul style="list-style-type: none"> <li>- Number/Street/ Apartment/P.O. Box</li> <li>- City/Town</li> <li>- Province or Territory</li> <li>- Country</li> <li>- Postal Code</li> </ul> (Mandatory)	The address or P.O. Box at which the party can be reached by mail.
<b>Street Address</b>	
Same as Mailing Address	If selected, the fields below will automatically be populated.
<ul style="list-style-type: none"> <li>- Number/Street/ Apartment/P.O. Box</li> <li>- City/Town</li> <li>- Province or Territory</li> <li>- Country</li> <li>- Postal Code</li> </ul> (Mandatory)	The address or at which the party can be reached.
<b>LIST OF CLIENTS TO BE SERVED</b>	
<b>Delivery Organization</b>	
Type (Mandatory)	The type of organization completing the report.

Name (Mandatory)	The official name of the organization.
Number	The organization's identification number, if available. This field is only mandatory if the organization has an identification number.
Client Information For the purpose of this form, each school that was evaluated is a client.	
Type (Mandatory)	The only eligible clients for the School Program Evaluation Report are Elementary or Secondary schools.
Name (Mandatory)	The official name of the client.
Number (Mandatory)	The client's identification number, if applicable.
<b>ACTIVITES UNDERTAKEN AND RESULTS ACHIEVED</b>	
Delivery Organization - Type - Name - Number (Auto-Fill and Mandatory)	Automatically copied from the Organization Identification section.
Objective	
Objective (Mandatory)	The objectives are in line with the program terms and conditions.
Activity	
Type (Mandatory)	A list of possible activities for the Objective.
Name (Mandatory)	The activity name must be unique.
Extent Completed (Mandatory)	Indicate the extent to which the activity was completed as described on the approved proposal. Select Fully, Partially, or Not at all.
Reason not fully completed (Mandatory)	This field is enabled and mandatory if the Extent Completed is not Fully.
Explanation (Mandatory)	A detailed explanation for why the activity was not fully completed. This field is mandatory if the Extent Completed is not Fully.
Activities Undertaken (Mandatory)	A narrative description of the activities undertaken as compared with what was planned
Results Achieved (Mandatory)	A narrative description of the results achieved as compared with what was planned
Audience	
Type (Mandatory)	A list of Audience types.

Number Reached (Mandatory)	The number of individuals reached by this activity.
Expenses This section of the form includes the funds expended for each of the activities.	
Expense Type (Mandatory)	A list of possible Expense Types.
Amount Spent (Mandatory)	The amount spent for this Expense Type for this Objective.
Explanation (Mandatory)	An explanation of the amount spent.
Total (Auto-Calc)	This field is automatically calculated.

#### Summary of Expenses

This section is a summary of the expenses and is where you enter administration costs.

Sub-Total Amount before Program Administration Costs (Auto-Calc)	A sub-total before administration costs. This field is automatically calculated.
Administration Costs (Mandatory)	The cost for administration for this fiscal year.
Explanation (Mandatory)	A detailed explanation or description for the Administration Cost.
Total Requested (Auto-Calc)	This field is automatically calculated.
Program Administration Costs (Percentage) (Auto-Calc)	The Administration Costs are expressed as a percentage and are automatically calculated. It should not exceed 10% of the Sub-Total before Administration Costs.

#### **COSTS**

There is no information displayed in this section until you click Calculate.

Calculate Button (Auto-Calc and Mandatory)	A button used to display the summary of costs. The information is automatically populated from the Expense section.
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There is a table listing the Expense Types, Approved Amounts from the Proposal, the Amounts Spent, Program Administration Costs and a Grand Total.

#### **PARTNERS**

A Partner is an organization that you expect to provide or has provided funding or in-kind contributions to the project. If you add a Partner, these fields become mandatory.

Partner Organization Type (Mandatory)	A dropdown list of possible organizations that could be partners.
Partner Organization Name (Mandatory)	Official name of your partner.
Partner Organization Number (Mandatory)	The partner's identification number if available. This field is only mandatory if the partner has an identification number.

In-Kind Contribution (Mandatory)	A check box to indicate an in-kind contribution. The amount defaults to \$0.00.
Amount (Mandatory)	The amount received from the Partner.
Explanation (Mandatory)	A detailed explanation to describe the type of in-kind contribution expected or received or the main purpose of the funds received.

### **SUPPORTING DOCUMENTS**

If you add a supporting document, these fields become mandatory.

Type of Supporting Document (Mandatory)	A dropdown list of the types of mandatory documents. It is mandatory to attach the School Program Evaluation Report.
Name of Supporting Document (Mandatory)	The title and file name of the supporting document.
Method of Submission (Mandatory)	A dropdown list of possible submission methods.
File Name Attached (Auto-Fill)	The file name of the attached document.

### **DECLARATION**

Given Name (Mandatory)	The given name or first name.
Family Name (Mandatory)	The family name or surname.
Title/Position (Mandatory)	The job title or position.
Date (YYYY-MM-DD) (Mandatory)	Today's date, in the format of Year Month and Day.