

# POST-SECONDARY PARTNERSHIP PROGRAM REPORT – LIST OF DATA FIELDS

**DCI Number/Fiscal Year:**

434111 (2023-2024)

**Purpose:**

As per funding agreement

**Reporting Period:**

As per funding agreement

**Due Date:**

As per funding agreement

**Legend:**

- **Mandatory:** Completing all mandatory data fields will reduce potential delays as ISC Regional Office staff will need to contact recipients whose Report is incomplete.
- **Pre-populated:** These fields are automatically populated from the approved proposal such as Recipient Number and Recipient Name.
- **Auto-Calc:** Automatically calculated field.

**IMPORTANT:**

The list below is a representation of the data fields. The actual reports are available on the [ISC Services Portal](#) or through your Regional Office. Some of these reports will be available with your pre-populated data, which will save you preparation time. If you have any questions please contact your Regional Office.

**Field Descriptions:**

| Field                                                                                                                                             | Description                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <b>Report Identification</b>                                                                                                                      |                                                                                                                                         |
| This section of the form is used for identification and tracking purposes. The fiscal year is automatically filled with the relevant information. |                                                                                                                                         |
| Fiscal Year<br>(Auto-Calc)                                                                                                                        | The fiscal year is entered automatically.                                                                                               |
| Period<br>(Mandatory)                                                                                                                             | The time period on which you are reporting.                                                                                             |
| Title of the approved proposal for which this report is being submitted<br>(Pre-populated and Mandatory)                                          | Title of the approved proposal for which this report is being submitted.                                                                |
| <b>Organization Identification</b>                                                                                                                |                                                                                                                                         |
| This section is used to identify the organization completing the report and the Recipient who has the reporting requirement with ISC.             |                                                                                                                                         |
| Recipient Number<br>(Pre-populated and Mandatory)                                                                                                 | The recipient ID number as assigned by ISC.<br>Important: Make sure to enter a 4-digit number.<br>Add zeroes (0) in front if necessary. |

| Field                                                                                                                                                                                                                                               | Description                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Recipient Name<br>(Pre-populated and Mandatory)                                                                                                                                                                                                     | The official name of the Recipient of ISC funds.                                                                                                           |
| Organization Type<br>(Pre-populated and Mandatory)                                                                                                                                                                                                  | A drop-down list of possible organizations that could complete a Proposal.                                                                                 |
| Organization Name<br>(Pre-populated and Mandatory)                                                                                                                                                                                                  | The official name of your organization. This field is automatically populated when you enter the Organization Number in the next field and vice versa.     |
| Organization Number<br>(Pre-populated and Mandatory)                                                                                                                                                                                                | The official number of your organization. Some Organization Types do not require an Organization Number.                                                   |
| Telephone Number<br>(Mandatory)                                                                                                                                                                                                                     | The organization's telephone number.                                                                                                                       |
| Extension Number<br>(Pre-populated)                                                                                                                                                                                                                 | The extension number, if applicable.                                                                                                                       |
| Fax Number<br>(Pre-populated)                                                                                                                                                                                                                       | The organization's facsimile number.                                                                                                                       |
| E-mail Address<br>(Pre-populated)                                                                                                                                                                                                                   | The e-mail address of the organization's contact, if available.                                                                                            |
| Web site<br>(Pre-populated)                                                                                                                                                                                                                         | The home page URL for the organization's web site.                                                                                                         |
| <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> (Pre-populated and Mandatory)                                 | The address or P.O. Box at which the party can be reached by mail.                                                                                         |
| <b>List of Reporting Organizations</b>                                                                                                                                                                                                              |                                                                                                                                                            |
| Use this section to list the organizations that are providing you with their information in separate sub-reports.                                                                                                                                   |                                                                                                                                                            |
| <ul style="list-style-type: none"> <li>- Reporting Organization Type</li> <li>- Reporting Organization Name</li> <li>- Reporting Organization Number</li> <li>- Total Budget</li> <li>- File Name Attached</li> </ul> (Pre-populated and Mandatory) | Data fields will automatically be populated from the Sub-report once attached, as well as when selecting the Organization type from ISC Funded Recipients. |
| <b>Contacts</b>                                                                                                                                                                                                                                     |                                                                                                                                                            |
| 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<br>(Pre-populated and Mandatory)                                                                                                                                                                                                         | The given name or first name.                                                                                                                              |

| Field                                                                                                                                                                                                               | Description                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| Family Name<br>(Pre-populated and Mandatory)                                                                                                                                                                        | The family name or surname.                                                                  |
| Title/Position<br>(Pre-populated and Mandatory)                                                                                                                                                                     | The contact's job title or position.                                                         |
| Telephone Number<br>(Pre-populated and Mandatory)                                                                                                                                                                   | The contact's telephone number.                                                              |
| Extension Number<br>(Pre-populated)                                                                                                                                                                                 | The extension number, if applicable.                                                         |
| Fax Number<br>(Pre-populated)                                                                                                                                                                                       | The contact's facsimile number, if available.                                                |
| E-mail Address<br>(Pre-populated)                                                                                                                                                                                   | 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> (Pre-populated and 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> (Pre-populated and Mandatory) | The street address or P.O. Box at which the party can be reached by mail.                    |
| <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 person. |
| <b>Clients to be Served</b>                                                                                                                                                                                         |                                                                                              |
| <b>Delivery Organization</b>                                                                                                                                                                                        |                                                                                              |
| <ul style="list-style-type: none"> <li>- Delivery Organization Type</li> <li>- Delivery Organization Name</li> <li>- Delivery Organization Number</li> </ul> (Mandatory)                                            | Automatically copied from the Organization Identification section.                           |
| <b>Client Information</b>                                                                                                                                                                                           |                                                                                              |
| Client Type<br>(Mandatory)                                                                                                                                                                                          | Defaulted to First Nation.                                                                   |

| Field                                                                                                                                                                                      | Description                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Client Name<br>(Mandatory)                                                                                                                                                                 | The official name of the client.                                                                                                                                                                                                                     |
| Client Number<br>(Mandatory)                                                                                                                                                               | The client's identification number, if applicable.                                                                                                                                                                                                   |
| <b>Activities Undertaken and Results Achieved</b>                                                                                                                                          |                                                                                                                                                                                                                                                      |
| <b>Delivery Organization</b>                                                                                                                                                               |                                                                                                                                                                                                                                                      |
| <ul style="list-style-type: none"> <li>- Delivery Organization Type</li> <li>- Delivery Organization Name</li> <li>- Delivery Organization Number</li> </ul> (Pre-populated and Mandatory) | Automatically copied from the Organization Identification section.                                                                                                                                                                                   |
| First Nation Post-Secondary Education Institution<br>(Delivery Organization Type)<br>(Pre-populated and Mandatory)                                                                         | This Delivery Organization Type will automatically display the below three mandatory questions.                                                                                                                                                      |
| Did this organization increase its capacity to manage and support post-secondary education systems as a result of PSPP funding?<br>(Mandatory)                                             | Answer " <b>Yes</b> " or " <b>No</b> "                                                                                                                                                                                                               |
| Total number of Programs offered at this First Nation Post-Secondary Education Institution.<br>(Mandatory)                                                                                 | Enter number.                                                                                                                                                                                                                                        |
| Number of Programs offered at this First Nation Post-Secondary Education Institution which have been funded by PSPP<br>(Mandatory)                                                         | Enter number (cannot exceed number of programs offered at First Nation Post-Secondary Education Institution)                                                                                                                                         |
| <b>Objective</b>                                                                                                                                                                           |                                                                                                                                                                                                                                                      |
| Objective<br>(Pre-populated and Mandatory)                                                                                                                                                 | The objectives are from the approved proposal and are in line with the program terms and conditions.<br><b>First Nation Post-Secondary Institutions</b> will have to add the <b>Pandemic Adjustments</b> objective if emergency funding. (See below) |
| <b>Activity</b>                                                                                                                                                                            |                                                                                                                                                                                                                                                      |
| Activity Type<br>(Pre-populated and Mandatory)                                                                                                                                             | Activity type is pre-populated from the approved proposal.                                                                                                                                                                                           |
| Activity Name<br>(Pre-populated and Mandatory)                                                                                                                                             | Activity name is pre-populated from the approved proposal.                                                                                                                                                                                           |
| Extent Completed<br>(Mandatory)                                                                                                                                                            | Indicate the extent to which the activity was completed as described on the approved proposal.<br><br>Select Fully, Partially, or Not at all.                                                                                                        |
| Reason not Fully Completed<br>(Mandatory)                                                                                                                                                  | This field is enabled and mandatory if the Extent Completed is not Fully.                                                                                                                                                                            |

| Field                                                         | Description                                                                                                                                                   |
|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Explanation<br>(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<br>(Pre-populated and Mandatory)        | The Activities Undertaken is pre-populated from the approved proposal.                                                                                        |
| Results Achieved<br>(Mandatory)                               | A narrative description of the results achieved as compared with what was planned.                                                                            |
| <b>Institution Details for a Program of Study</b>             |                                                                                                                                                               |
| Degree Granting Institution<br>(Pre-populated and Mandatory)  | The educational institution that will be issuing the certificate or credentials.                                                                              |
| Area of Study – Category<br>(Pre-populated and Mandatory)     | The major area of study for the level of education<br><b>Note:</b> University and College Entrance Preparation program (UCEP) is under the Category of Other. |
| Area of Study - Sub-category<br>(Pre-populated and Mandatory) | This list is populated with relevant specializations based on the Category that you selected.<br>Select the area of study for the level of education.         |
| Level of Education Sought<br>(Pre-populated and Mandatory)    | The education level of the course.                                                                                                                            |
| Method of Delivery<br>(Pre-populated and Mandatory)           | The method by which the course will be delivered.                                                                                                             |
| <b>Audience</b>                                               |                                                                                                                                                               |
| Audience Type<br>(Pre-populated and Mandatory)                | Defaulted to Students.                                                                                                                                        |
| Target Number<br>(Pre-populated)                              | Automatically populated from the approved proposal.                                                                                                           |
| Number Reached<br>(Mandatory)                                 | The number of individuals reached by this activity.                                                                                                           |
| <b>Student Outcomes by Gender</b>                             |                                                                                                                                                               |
| Gender<br>(Mandatory)                                         | The gender, or sex, of the student.                                                                                                                           |
| Enrolled this year<br>(Mandatory)                             | The number of students who were enrolled to take the course during the reporting year.                                                                        |
| Successfully completed this year<br>(Mandatory)               | The number of students who successfully completed the course during the reporting year.                                                                       |
| <b>Student Outcomes by Full-Time / Part-Time Status</b>       |                                                                                                                                                               |
| Full-time<br>(Mandatory)                                      | The Full-time or Part-time status of the student.                                                                                                             |

| Field                                                                                                                                                                     | Description                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Enrolled this year<br>(Mandatory)                                                                                                                                         | The number of students who were enrolled to take the course during the reporting year.                                                                                                                                    |
| Successfully completed this year<br>(Mandatory)                                                                                                                           | The number of students who successfully completed the course during the reporting year.                                                                                                                                   |
| <b>Pandemic Adjustments Objective</b>                                                                                                                                     |                                                                                                                                                                                                                           |
| <b>First Nation administered Post-Secondary Institutions</b> who received Emergency Funding <b>MUST</b> add this Objective (Pandemic Adjustments) and report accordingly. |                                                                                                                                                                                                                           |
| Activity Type<br>(Mandatory)                                                                                                                                              | Defaulted to Emergency Funding Activities.                                                                                                                                                                                |
| Activity Name<br>(Mandatory)                                                                                                                                              | The activity name must be unique.                                                                                                                                                                                         |
| <b>Indicate how your Organization made use of the Emergency Funds (check all that apply – at least one of the check boxes needs to be completed).</b>                     |                                                                                                                                                                                                                           |
| Adapting courses for online learning                                                                                                                                      | Purchase of IT Hardware<br>Purchase of IT Software<br>Upgrading Internet access<br>Other                                                                                                                                  |
| Implementing public health guidelines related to the pandemic                                                                                                             | Installing Plexiglas shields<br>Deep cleaning of the facilities<br>Personal Protective Equipment (PPE) (masks, gloves, sanitizer, etc., for students, staff and visitors for in-person services<br>Other (Please specify) |
| Automating services to process student applications and registrations                                                                                                     | Purchase of IT Hardware<br>Purchase of IT Software<br>Upgrading Internet access<br>Other (Please specify)                                                                                                                 |
| Development of specific COVID-19 resources to support staff and instructors                                                                                               | Additional support staff<br>Other (Please specify)                                                                                                                                                                        |
| Culturally responsive counselling for students                                                                                                                            | Additional counselling for students<br>Other (Please specify)                                                                                                                                                             |
| <b>Pandemic Adjustments Expenses</b>                                                                                                                                      |                                                                                                                                                                                                                           |
| Expense Type<br>(Pre-populated and Mandatory)                                                                                                                             | Defaulted to Emergency Funds.                                                                                                                                                                                             |
| Amount Approved                                                                                                                                                           | Blank as not part of the proposal.                                                                                                                                                                                        |
| Amount Spent<br>(Mandatory)                                                                                                                                               | The amount spent on this Activity for this objective.                                                                                                                                                                     |
| Explanation<br>(Mandatory)                                                                                                                                                | An explanation of how funding was spent.                                                                                                                                                                                  |
| Total<br>(Auto-Calc)                                                                                                                                                      | This field is automatically calculated.                                                                                                                                                                                   |
| <b>Expenses</b>                                                                                                                                                           |                                                                                                                                                                                                                           |

| Field                                                                                                   | Description                                                            |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| This section of the form collects planned expenses required to undertake activities for this objective. |                                                                        |
| Expense Type<br>(Pre-populated and Mandatory)                                                           | A list of possible Expense Types.                                      |
| Amount Approved<br>(Pre-populated)                                                                      | Automatically populated from the approved proposal.                    |
| Amount Spent<br>(Mandatory)                                                                             | The amount spent on this Activity for this objective.                  |
| Explanation<br>(Mandatory)                                                                              | An explanation of any variances between the amount approved and spent. |
| Total<br>(Auto-Calc)                                                                                    | This field is automatically calculated.                                |

### Summary of Expenses

This section is a summary of the expenses that are applicable to all Education Programs.

#### Amount Approved

|                                                                         |                                                                                                                                                                 |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sub-Total Amount before Program Administration Costs<br>(Pre-populated) | A sub-total before administration costs. Automatically populated from the approved proposal.                                                                    |
| Administration Costs<br>(Pre-populated)                                 | The cost for administration for this fiscal year. Automatically populated from the approved proposal.                                                           |
| Total<br>(Auto-Calc)                                                    | This field is automatically calculated.                                                                                                                         |
| Program Administration Costs (Percentage)<br>(Auto-Calc)                | The Administration Costs are expressed as a percentage and are automatically calculated. It should not exceed 15% of the Sub-Total before Administration Costs. |

#### Amount Spent

|                                                                     |                                                                                                                                                                 |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sub-Total Amount before Program Administration Costs<br>(Auto-Calc) | A sub-total before administration costs. This field is automatically calculated.                                                                                |
| Administration Costs<br>(Mandatory)                                 | The cost for administration for this fiscal year.                                                                                                               |
| Explanation<br>(Mandatory)                                          | A detailed explanation or description for the Administration Cost.                                                                                              |
| Total Requested<br>(Auto-Calc)                                      | This field is automatically calculated.                                                                                                                         |
| Program Administration Costs (Percentage)<br>(Auto-Calc)            | The Administration Costs are expressed as a percentage and are automatically calculated. It should not exceed 15% of the Sub-Total before Administration Costs. |

#### Costs

| Field                                                                                                                                              | Description                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| There is no information displayed in this section until you click <b>Calculate</b> .                                                               |                                                                                                                                     |
| Calculate Button<br>(Auto-Calc and Mandatory)                                                                                                      | A button used to display the summary of costs. The information is automatically populated from the Expense section.                 |
| There is a table listing the Expense Types, Approved Amounts from the Proposal, the Amounts Spent, Program Administration Costs and a Grand Total. |                                                                                                                                     |
| <b>Partners</b>                                                                                                                                    |                                                                                                                                     |
| A Partner is an organization that you expect to provide or has provided funding or in-kind contributions to the project.                           |                                                                                                                                     |
| Partner Organization Type<br>(Pre-populated and Mandatory)                                                                                         | A drop-down list of possible organizations that could be partners.                                                                  |
| Partner Organization Name<br>(Pre-populated and Mandatory)                                                                                         | Official name of your partner.                                                                                                      |
| Partner Organization Number<br>(Pre-populated and Mandatory)                                                                                       | The partner's identification number if available. This field is only mandatory if the partner has an identification number.         |
| In-Kind Contribution<br>(Pre-populated and Mandatory)                                                                                              | A check box to indicate an in-kind contribution. The amount defaults to \$0.00.                                                     |
| Amount<br>(Mandatory)                                                                                                                              | The amount received from the Partner.                                                                                               |
| Explanation<br>(Mandatory)                                                                                                                         | A detailed explanation to describe the type of in-kind contribution expected or received or the main purpose of the funds received. |
| <b>Supporting Documents</b>                                                                                                                        |                                                                                                                                     |
| Type of Supporting Document<br>(Mandatory)                                                                                                         | A drop-down list of the types of mandatory documents.<br><br>If there are no mandatory documents, the only available item is Other. |
| Name of Supporting Document<br>(Mandatory)                                                                                                         | The title and file name of the supporting document.                                                                                 |
| Method of Submission<br>(Mandatory)                                                                                                                | A drop-down list of possible submission methods.                                                                                    |
| File Name Attached<br>(Mandatory)                                                                                                                  | The file name of the attached document will appear automatically.                                                                   |
| <b>Declaration</b>                                                                                                                                 |                                                                                                                                     |
| Given Name<br>(Mandatory)                                                                                                                          | The given name or first name.                                                                                                       |
| Family Name<br>(Mandatory)                                                                                                                         | The family name or surname.                                                                                                         |
| Title<br>(Mandatory)                                                                                                                               | The job title or position.                                                                                                          |



| Field               | Description               |
|---------------------|---------------------------|
| Date<br>(Mandatory) | Today's date (YYYY-MM-DD) |