

Public Computer Center Annual Performance Progress Report Introduction

SUBMISSION REQUIREMENTS:

All Broadband Technology Opportunities Program (BTOP) grant recipients are required to complete an annual performance progress report. The attached performance progress report form must be completed and submitted after the end of every calendar year in the Post-Award Monitoring (PAM) System, and reports must be submitted separately for each BTOP award. The prime recipient is solely responsible for the accurate completion and timely submission of this form.

DEADLINE:

All recipients are required to submit their annual performance progress report each year on January 30th, by 11:59pm ET. The timely submission of performance progress reports is a requirement of all BTOP awards as stated in the special award conditions. Incomplete submissions will be sent back to the recipient for further information. Annual reports are to be submitted in addition to the required quarterly report which is due concurrently. The reports are different in scope and must be answered separately.

COMPLETING THE PERFORMANCE PROGRESS REPORT:

To begin preparing the performance progress report, the recipient should log into PAM and create a PPR report package for the relevant reporting period. The recipient should download the report template from PAM. As described in the attached instructions, PAM will pre-populate some of the information in the template with information already stored in PAM.

The BTOP annual performance progress report form consists of two main sections:

- Section 1: General Information
- Section 2: Report Data Fields

Each question must be answered fully and accurately (within the specified word limits). If your answer to certain questions does not fit in the space provided, please provide additional information in a separate document or spreadsheet, using the format provided in the performance progress report form. If a particular question does not apply to your project, please write "N/A" or "0" in the response field. All fields should be filled out either with the requested data or "N/A." Please note that even if the only access to the information is through a subrecipient, contractor, and/or subcontractor, the prime recipient is responsible for collecting this information and submitting it to NTIA.

Please reference the attached line item instructions and the PAM User Guide for assistance. If you have additional questions, please contact your assigned Federal Program Officer.

DATA REVIEW:

Program Office staff will be responsible for reviewing performance progress reports and may need to follow up with recipients regarding the submitted data. Recipients must promptly respond to any and all Program Office follow-up questions regarding the submitted data; in some cases, recipients will be required to revise and re-submit performance progress reports. The data provided will be compared to each recipient's Baseline Project Plan and will help the Program Office monitor the progress and performance of each BTOP project.

Once approved by the Program Office, all performance progress reports will be made publicly available via the Internet. To the extent that recipients believe that the information they are providing is confidential, recipients may make a request for such information to be kept private and identify any information they believe should not be released to the public. They should also provide both a redacted and an unredacted version of their report. Recipients should note, however, that the Recovery Act requires substantial transparency and that NTIA may not necessarily approve such requests. If NTIA does approve, the agency will keep such information private from public disclosure to the extent permitted by law, including the Freedom of Information Act, as amended (5 U.S.C. 552), the Trade Secrets Act, as amended (18 U.S.C. 1905), and the Economic Espionage Act of 1996 (18 U.S.C. 1831 et seq.).

RECIPIENT NAME:
 AWARD NUMBER:
 DATE:

OMB CONTROL NO. 0660-0037
 EXPIRATION DATE: 12-31-2013

Annual Performance Progress Report Questions for Public Computer Centers

General Information				
		Page	of	Pages
1. Federal Agency and Organization Element to Which Report is Submitted	2. Award Identification Number	3. DUNS Number		
4. Recipient Organization (Name and complete address including county, congressional district, and zip code)				
5. Current Reporting Period End Date (MM/DD/YYYY)		6. Is this the Last Annual Report of the Award Period?		<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.				
7a. Typed or Printed Name and Title of Certifying Official		7c. Telephone (area code, number and extension)		
		7d. Email Address		
7b. Signature of Certifying Official		7e. Date Report Submitted (MM/DD/YYYY)		

RECIPIENT NAME:
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1. Are you establishing new Public Computer Centers (PCCs) or improving existing PCCs?					
___ New		___ Improved		___ Both	
2. How many PCCs were established or improved, and what type of institution(s) were they associated with? Please provide actual total numbers to date. Figures should be reported cumulatively from award inception to the end of the most recent calendar year. Recipients should only count the PCCs that were fully established or in which improvements have been fully completed in that year (that is, partial improvements should not be counted).					
Institutions		Established	Improved	Total	
Schools (K-12)					
Libraries					
Community Colleges					
Universities/Colleges					
Medical/Healthcare Facilities					
Public Safety Entities					
Job-Training and/or Economic Development Institution					
Other Community Support-Governmental (please specify):					
Other Community Support-Non-Governmental (please specify):					
3. Please complete the following chart for each PCC established or improved using BTOP funds. Please provide actual total numbers to date.					
3.a. New PCCs					
New PCC Address	Number of Workstations Available to the Public	Total Hours of Operation per 120-hour Business Week	Total Hours of Operation per 48-hour Weekend	Speed of Broadband Access to Facility (Mbps)	Average Number of Users per Week
3.b. Improved PCCs					
Improved PCC Address	Number of Workstations Available to the Public	Total Hours of Operation per 120-hour Business Week	Total Hours of Operation per 48-hour Weekend	Speed of Broadband Access to Facility (Mbps)	Average Number of Users per Week
Prior to Improvement					
After Improvement					

RECIPIENT NAME:
 AWARD NUMBER:
 DATE:

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4.a. Please check the primary uses of the PCCs funded by this award. (Check all that apply.)					
___ Open Lab Time		___ Training		___ Other	
4.b. If "other," please specify the primary use of the PCCs:					
5. Please list all of the PCC broadband equipment and/or supplies you have purchased during the past year using BTOP grant funds or other (matching) funds, including any customer premises equipment or end-user devices. If additional space is needed, please attach a list of equipment and/or supplies. Please also describe how the equipment and supplies have been deployed (600 words or less).					
Manufacturer	Item	Unit Cost per Item	Number of Units	Narrative description of how the equipment and supplies were deployed	
Totals					
6. For PCC access and training provided with BTOP grant funds, please provide the information below. Figures should be reported <u>cumulatively</u> from award inception to the end of the most recent calendar year.					
Types of Access or Training			Number of People Targeted	Number of People Participating	Total Hours of Training Offered
Open Lab Access					0
Multimedia					
Office skills					
ESL					
GED					
College Preparatory Training					
Basic Internet and Computer Use					
Certified Training Programs					
Other (please specify):					
Total					
7. Please describe how your Public Computer Center(s) promotes economic recovery in your area, such as through providing job training, access to job searches, online course offerings, certifications and the like (600 words or less).					
8. To the extent that you have made any subcontracts or subgrants, please provided the number of subcontracts or subgrants that have been made to socially and economically disadvantaged small business (SDB) concerns as defined by section 8(a) of the Small Business Act, 15 U.S.C. 647, as modified by NTIA's adoption of an alternative small business size standard for use in BTOP. Please also provide the names of these SDB entities (150 words or less).					
9. Please describe any best practices/lessons learned that can be shared with other similar BTOP projects (900 words or less).					

Public Computer Center Performance Progress Report Instructions

Line Item Instructions for the Performance Progress Report Attachment (BTOP Annual Report for Public Computer Center Projects)

Question Number	Reporting Item	Instructions	Clarification and Definitions
General Information			
1	Federal Agency and Organizational Element to Which Report is Submitted	PAM will pre-populate this information in the PPR template.	"Department of Commerce, National Telecommunications and Information Administration."
2	Award Identification Number	PAM will pre-populate this information in the PPR template.	This should match your 10 digit grant award number listed on your award package CD-450 form.
3	DUNS Number	PAM will pre-populate this information in the PPR template.	The number entered should match the Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number listed on your award package CD-450 form.
4	Recipient Organization	PAM will pre-populate this information in the PPR template.	The data entered should match the data listed on your award package CD-450 form.
5	Reporting Period End Date	PAM will pre-populate this information in the PPR template.	
6	Is this the last annual	Check yes or no.	

	report of the award period?		
7a	Certifying Official	PAM will pre-populate this information in the PPR template.	The Certifying Official should be the AOR or the Principal Investigator/Project Manager designated by the AOR.
7b	Certifying Official Signature	PAM will add this information electronically when the report is submitted.	
7c	Telephone Number	PAM will pre-populate this information in the PPR template.	
7d	Email Address	PAM will pre-populate this information in the PPR template.	
7e	Report Submission Date	PAM will add this information electronically when the report is submitted.	Reports are to be submitted by the annual due dates.
Project Indicators			
1	Project Purpose	Please identify whether your project establishes new PCCs, improves existing PCCs, or both.	<p>New PCCs include all PCCs that do not replace or improve upon previously existing PCCs. New PCCs can include new construction or the conversion of previous building space.</p> <p>Improved PCCs include all previously existing PCCs that are part of the project; improvements can involve renovating the physical facilities of the PCC, expanding the number of workstations, improving the level of technology and type of equipment available, etc.</p>
2	Associated Institutions	How many PCCs were established or	If a PCC served more than one type, enter

		<p>improved, and what type of institution(s) were they associated with? Please provide actual total numbers to date. Figures should be reported cumulatively from award inception to the end of the most recent calendar year. Recipients should only count the PCCs that were fully established or in which improvements have been fully completed in that year (that is, partial improvements should not be counted).</p>	<p>data for each applicable institution. Multi-use facilities should be classified as one type or another and not counted twice. For each institution type, enter "0" if your project's PCCs are not associated with that type.</p>
<p>3a</p>	<p>New PCCs</p>	<p>Please complete the following chart for each PCC established or improved using BTOP funds. Please provide actual total numbers to date.</p>	<p>Number of Workstations Available to the Public: Please provide the total number of individual workstations that can be accessed by members of the public.</p> <p>Total Hours of Operation per 120-hour Business Week: Please provide the total number of hours that the PCC is open and accessible to the public Monday through Friday (a maximum of 24 hours per day or 120 hours).</p> <p>Total Hours of Operation per 48-hour Weekend: Please provide the total number of hours that the PCC is open and accessible to the public on Saturday and Sunday (a maximum of 24 hours per day or 48 hours).</p> <p>Speed of Broadband Access at the Facility (Mbps): Please provide the speed of access for the facility.</p> <p>Average Number of Users per Week: Please provide the average number of users who use the services and equipment</p>

Not for Submission

			<p>offered by the PCC under this grant program. Users may be counted more than once if they utilize the training, services, and equipment provided more than once in a given week. To calculate this number, record the number of users in the center each week during the reporting period, eliminate any outlier numbers (e.g., during a holiday week where your center was closed more than 50% of its normal operating time), and then calculate the average of the remaining weekly numbers.</p>
3b	Improved PCCs		<p>Please count only the PCCs whose improvements have been fully completed in the past year; partial improvements should not be recorded.</p> <p>Figures are requested for each PCC before improvement and after improvement.</p> <p>Number of Workstations Available to the Public: Please provide the total number of individual workstations that can be accessed by members of the public.</p> <p>Total Hours of Operation per 120-hour Business Week: Please provide the total number of hours that the PCC is open and accessible to the public Monday through Friday (a maximum of 24 hours per day or 120 hours).</p> <p>Total Hours of Operation per 48-hour Weekend: Please provide the total number of hours that the PCC is open and</p>

Not for Submission

			<p>accessible to the public on Saturday and Sunday (a maximum of 24 hours per day or 48 hours).</p> <p>Speed of Broadband Access at the Facility (Mbps): Please provide the speed of access for the facility.</p> <p>Average Number of Users per Week: Please provide the average number of users who use the services and equipment offered by the PCC under this grant program. Users may be counted more than once if they utilize the training, services, and equipment provided under the grant more than once in a given week. To calculate this number for a given PCC, record the number of users in the center each week during the reporting period, eliminate any outlier numbers (e.g., during a holiday week where your center was closed more than 50% of its normal operating time), and then calculate the average of the remaining weekly numbers.</p>
4	PCC Primary Use	Please provide the primary uses or the PCCs funded by this award. (Check all that apply.)	<p>Open Lab Time: Open access to services and equipment for the public.</p> <p>Training: Scheduled training courses offered to the public.</p> <p>Other: If the primary use of the PCC is neither open lab time nor training, please describe.</p>
5	PCC Equipment and/or Supplies	Please list all of the PCC broadband equipment and/or supplies you have purchased using	Equipment is defined as tangible, nonexpendable, personal property having

		<p>BTOP grant funds or other (matching) funds, including any customer premises equipment or end-user devices. If additional space is needed, please attach a list of equipment and/or supplies. Please also describe how the equipment and supplies have been deployed.</p>	<p>a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.</p> <p>Supplies are defined as all tangible personal property other than "equipment".</p> <p>Please limit narrative descriptions to 600 words or less.</p>
6	PCC Access and Training	<p>For PCC access and training provided with BTOP grant funds, please provide the information requested. Figures should be reported cumulatively from award inception to the end of the most recent calendar year.</p>	<p>Recipients are not required to report upon hours of training provided during open access. This field has been pre-populated with a 0.</p> <p>The number of training participants includes the number of individuals attending scheduled, teacher-led training courses. Participants may be counted more than once if they attended multiple types of training.</p> <p>You may specify additional types of training or access as needed.</p> <p>To calculate "Total Hours of Training Offered," multiply the hours per program by the number of participants. For example, if 10 people took a one hour class, that program provided 10 training hours.</p> <p>Please enter a "0" in each column if your project has not provided a particular type of training.</p>
7	Economic Recovery	<p>Please describe how your Public Computer Center(s) promotes economic recovery in your</p>	<p>Include in your narrative how your project meets the statutory purposes of BTOP and</p>

		area, such as through providing job training, access to job searches, online course offerings, certifications and the like.	the Recovery Act. Please limit narrative descriptions to 600 words or less.
8	Small Business Concern	To the extent that you have made any subcontracts or subgrants, please provide the number of subcontracts or subgrants that have been made to socially and economically disadvantaged small business (SDB) concerns as defined by section 8(a) of the Small Business Act, 15 U.S.C. 647, as modified by NTIA's adoption of an alternative small business size standard for use in BTOP. Please also provide the names of these SDB entities.	BTOP defines a "socially and economically disadvantaged small business concern as "a firm, together with its controlling interests and affiliates, with average gross revenue not exceeding \$40 million for the preceding three years, and that meets the definition of a socially and economically disadvantaged small business concern under the Small Business Act." Please limit narrative responses to 150 words or less.
9	Best Practices	Please describe any best practices/lessons learned that can be shared with other similar BTOP projects, if any.	Please limit narrative descriptions to 900 words or less.

Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 2.23 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anthony G. Wilhelm, Director, Broadband Technology Opportunities Program, Office of Telecommunications and Information Applications, National Telecommunications and Information Administration, U.S. Department of Commerce (DOC), 1401 Constitution Avenue, N.W., HCHB, Room 4887, Washington, D.C. 20230