# CHAMP Quarterly Report

Q1 Please complete the following information. An asterisk (\*) denotes a required field.

First Name \* (1)

Last Name \* (2)

Title (Grant Role) \* (3)

Street Address \* (4)

Street Address 2 (5)

City \* (6)

State \* (7)

Zip Code \* (8)

Phone Number \* (9)

Extension (10)

Email Address \* (11)

Q3 Enter a summary of grant activities during this quarter [insert date] 400 character max; Response Required

Q4 Enter an update on organizations that contributed resources during this quarter [insert date] 300 characters max; Response Required

Q5 Enter an update on the ways in which resources were used during the last quarter: 300 characters max); Response Required

Q6 Comments: 300 characters max: Response Required

Q7 During the last quarter, did you receive additional leveraged resources beyond what is listed in your statement of work?

* Yes (1)
* No (2)

Q8 Enter the involvement of the required employer(s) during the current phase of the project [insert date] 200 characters max; Response Required

Q9 Enter specific roles and contributions of the employer during this quarter [insert date]  200 characters max; Response Required

Q10 Enter any challenges encountered or resolved in the development and management of the employer involvement during this quarter [insert date] 300 characters max; Response Required

Q11 Enter any new employers and commitments that may have been added during this quarter [insert date] to support the project 300 characters max; Response Required

Q12 Comments: 500 characters max; Response Required

Q13 Have you had any consultation or advisory meetings with business or employer partners during this quarter [insert date]? Response Required

* Yes (1)
* No (2)

Q14 Were there any direct hires of program of study completers by employer partners during this quarter [insert date]? Response Required

* Yes (1)
* No (2)

Q15 Were internships or other work-based learning opportunities posted during this quarter [insert date]? Response Required

* Yes (1)
* No (2)

Q16 Did you acquire any additional employer partners during this quarter [insert date]? Response Required

* Yes (1)
* No (2)

Q17 Please discuss grant activities that occurred during this quarter [insert date]: 500 character max; Response Required

Q19 Comments: 700 character max; Response Required

Q20 How many programs are you planning to offer over the life of the grant?

Q21 As of this quarter [insert date], how many programs have you launched to date?

Q24 How many students have been enrolled in the manufacturing program since Fall Semester 2013?

Q25 How many TAA recipients have been enrolled in manufacturing programs since the start of the project?

Q26 How many “TAA-like” individuals have been enrolled in manufacturing programs since the start of the project? (TAA-like includes unemployed, WIA recipients, TANF recipients, people receiving other services from the workforce center)

Q27 How many people has your Navigator served since the start of the project?

Q28 How many people have entered the manufacturing program through workforce center referrals since the start of the project?

Q29 How many people have been awarded credit for prior learning in manufacturing since the start of the project?

Q31 How many students have transferred from community college manufacturing programs to the manufacturing program at Metropolitan State University Denver since the start of the project?

Q32 How many courses do you have completed in OER format?

Q33 How many more courses do you have to complete in OER?

Q22 Issues and Technical Assistance Needs No character limit

Q23 Best Practices No character limit

Q24 Promising New Strategies No character limit

Q25 Before you submit this report by clicking the right arrow: Is there any additional outcome information related to this reporting quarter [insert date]? 700 characters max