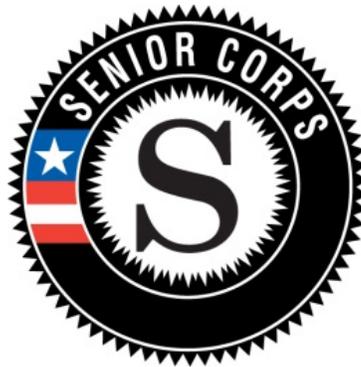




**2015 Progress Report Supplement (PRS) Data  
Collection**  
eGrants Step-by-Step Instructions for Grantees



**Foster Grandparent Program (FGP)**

## BEFORE GETTING STARTED

The following eGrants screen shots and instructions will walk you through completing the Progress Report Supplement (PRS) formerly known as the Project Profile and Volunteer Activity (PPVA). Below are a few tips to remember when completing your PRS.

1. All of the fields on the PRS form are required. Each field must be completed in order to submit the PRS. If there are no numbers to report for a particular data field, please enter a "0".
  2. Please be sure to **scroll down to the end of each category** to ensure all required fields are filled in.
  3. You will be unable to make changes once the report has been submitted. To make changes after the submission, please contact your CNCS State Office.
  4. To print a copy of the PRS, click on the **"Print PRS"** button on the "Review and Submit" screen.
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## Instructions for Logging into eGrants

To log into eGrants: go to [www.nationalservice.gov](http://www.nationalservice.gov) and scroll down to click on eGrants link.



You will be directed to the eGrants page on our website which gives you a brief introduction to eGrants and the eGrants Help Desk Information. You will then click on the eGrants Log-in link.

A dark blue rectangular button with the text "eGrants Log-in" in white, centered on the button.

**eGrants Log-in**

The eGrants log-in screen will appear.

**\*Note: You may have to temporarily enable pop-ups in order to move forward.**

All current and previous grantees can type in their grantee user name and password. Click the “*Login to eGrants*” link.

If you cannot remember your eGrants user name or password, please contact the National Service Hotline at (800) 942-2677 (M -Th., 9:00A.M. – 7:00P.M. Eastern Time).

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## Instructions for Entering Information in the Progress Report Supplement

Once you have logged into eGrants with your user name and password, you will be taken to the home screen.

**Step (1)** Click on “*Progress Report Supplement*” under Reporting to CNCS.



**Step (2)** Select the most current grant number. The “**edit**” link will appear in the right column; click on it to fill out the PRS. To ensure that you have selected the correct grant number, you can check the reporting period.

Grant #13GXSFL001 - Senior Corps PRS				
Reporting Date	Due Date	Extension Date	Status	
10/01/2014 - 09/30/2015	11/04/2015		PRS Initial Entry	<a href="#">edit</a>   <a href="#">print</a>

\*Note: If you do not know your current grant number, please contact your CNCS State Office.

**Step (3)** The next screen verifies the grant number with the program, the due date, the status, and the reporting period.

[cancel](#) [next](#)

For information about the Progress Report Supplement ?

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**Senior Corps PRS**

**Grant#** 13GXSFL001 - FGPF

**Due Date:** 11/04/2015

**Status:** PRS Initial Entry

**Reporting Period:** 10/01/2014 - 09/30/2015

Please note the Due Date (**11/06/2015**) and the Reporting Period (**10/01/2014 – 09/30/2015**).

### PR Supplement

- ➔ Senior Corps PRS

- Demographics
- Service Information
- Client Information
- Special Needs Served
- Review and Submit

In the left column, you will notice different sections for entering specific data. You cannot move to the next section until you have completed all fields. By clicking the “*next*” button, you will be able to move to the next section.

**Step (4)** The first section is *Demographics* with four groups (Age Group, Gender, Ethnicity, and Racial Group). In this section, you will enter the number of volunteers in each field. All FGP volunteers must be accounted for in the Age Group and Gender groups. The sum of the number of volunteers in the subcategories of each group should be equal to the total number of volunteers active during the reporting period for your FGP project. For Ethnicity and Racial Group, please enter all available information regarding the number of volunteers in each subcategory. Click “next” to continue to the next section.

**Progress Report Supplement**

All of the fields on the PRS form are required. You must complete each field in order to submit the PRS. If there are no numbers to report for a particular data field, enter a 0.  
 Be sure to scroll down to the end of each category to ensure completion of all required fields.

For more Information [click here](#) 

**Demographics**

Age Group	# of Vols
55 to 59	<input type="text" value="0"/>
60 to 69	<input type="text" value="0"/>
70 to 79	<input type="text" value="0"/>
80 to 84	<input type="text" value="0"/>
85 and over	<input type="text" value="0"/>
Gender	# of Vols
Female	<input type="text" value="0"/>
Male	<input type="text" value="0"/>
Ethnicity	# of Vols
Hispanic or Latino	<input type="text" value="0"/>
Non-Hispanic or Non-Latino	<input type="text" value="0"/>
Racial Group	# of Vols
American Indian or Alaskan Native	<input type="text" value="0"/>
Asian	<input type="text" value="0"/>
Black or African American	<input type="text" value="0"/>
Native Hawaiian or Pacific Island	<input type="text" value="0"/>
White	<input type="text" value="0"/>

**Step (5)** The next section is *Service Information* with five groups (Volunteers, Applicants, Volunteers Separated, Hours Served, and Volunteer Client Ratio). In this section, you will enter the number of volunteers in each field. Click “*next*” to continue to the next section.

Please note the descriptions for the following fields:

**Total number of Volunteers federally funded:** Enter the total number of FGP volunteers who are federally funded under CNCS funds.

**Total number of volunteers non-federally funded:** Enter the total number of FGP volunteers are not federally funded under CNCS funds.

**Total number of seniors on waiting list to be FGP volunteers:** Enter the total number of FGP volunteers who are waiting to be a FGP volunteer.

Progress Report Supplement

back save next

All of the fields on the PRS form are required. You must complete each field in order to submit the PRS. If there are no numbers to report for a particular data field, enter a 0.  
Be sure to scroll down to the end of each category to ensure completion of all required fields.

For more information click here ?

**Service Information**

Volunteers	# of Vols
Total number of Volunteers	<input type="text" value="0"/>
Total number of Volunteers federally funded	<input type="text" value="0"/>
Total number of Volunteers non-federally funded	<input type="text" value="0"/>
Total Number of Non-Stipend Volunteers	<input type="text" value="0"/>
Total number of Foster Grandparents who served in private homes	<input type="text" value="0"/>
Total number of US Armed Forces Service members serving as FGP volunteers	<input type="text" value="0"/>
Total number of volunteers serving as FGP with family members actively serving in the military	<input type="text" value="0"/>
Number of veterans serving as FGP volunteers	<input type="text" value="0"/>
Total number of seniors on waiting list to be FGP volunteers	<input type="text" value="0"/>
Total number of hours served	<input type="text" value="0"/>
Applicants	# of Vols
Able to enroll due to age set to 55	<input type="text" value="0"/>
Able to enroll due to income eligibility change	<input type="text" value="0"/>
Volunteers Separated	# of Vols
Employment, moved, family, new interests	<input type="text" value="0"/>
Health problems, death	<input type="text" value="0"/>
Transportation problems	<input type="text" value="0"/>
Income became over allowable guidelines to receive stipend	<input type="text" value="0"/>
Poor performance	<input type="text" value="0"/>
Hours Served	# of Vols
Number of Volunteers serving 15 - 19 Hours per week	<input type="text" value="0"/>
20 - 29 Hours per week	<input type="text" value="0"/>
30 - 40 Hours per week	<input type="text" value="0"/>
Volunteer Client Ratio	# of Vols
Serve 1 client weekly	<input type="text" value="0"/>
Serve 2 clients weekly	<input type="text" value="0"/>
Serve 3 - 5 clients weekly	<input type="text" value="0"/>
Serve 6 - 10 clients weekly	<input type="text" value="0"/>
Serve 11 or more weekly	<input type="text" value="0"/>

**Step (6)** The next section is *Client Information* with two groups (Ages of Clients Served and Clients Served). In this section, you will enter the number of clients in each field. Click “next” to continue to the next section.

The total number of children of National Guard Reservists served refers to the children of the National Guard Reservists only.

The total number of children of US Armed Forces Service members served by FGP volunteers includes all types of military services (Reserve, National Guard, or Active).

**Progress Report Supplement**

← back   save   next →

All of the fields on the PRS form are required. You must complete each field in order to submit the PRS. If there are no numbers to report for a particular data field, enter a 0. Be sure to scroll down to the end of each category to ensure completion of all required fields. For more Information click here ?

**Client Information**

Ages of Clients Served	# of Clients
Birth to age 5	<input type="text" value="0"/>
Ages 6 - 12	<input type="text" value="0"/>
Ages 13 - 19	<input type="text" value="0"/>
Youth Ages 20 and over	<input type="text" value="0"/>
Clients Served	# of Clients
Total number of children/youth served	<input type="text" value="0"/>
Number of children/youth awaiting service of a Foster Grandparent	<input type="text" value="0"/>
Total number of children of National Guard Reservists served	<input type="text" value="0"/>
Total number of children of US Armed Forces Service members served	<input type="text" value="0"/>
Total number of children of prisoners served	<input type="text" value="0"/>
Total number of children mentored	<input type="text" value="0"/>

**Progress Report Supplement**

← back   save   next →

All of the fields on the PRS form are required. You must complete each field in order to submit the PRS. If there are no numbers to report for a particular data field, enter a 0. Be sure to scroll down to the end of each category to ensure completion of all required fields. For more Information click here ?

**Special Needs Served**

Special Needs	# of Vols	in Home	Not in Home
Abused/Neglected Children	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Boarder Babies	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Children with HIV/AIDS	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Developmental Disabilities	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Emotional Disabilities	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Hearing Impaired	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Homeless	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Adjudicated Youth / Juvenile Offenders	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Language Barriers	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Learning Disabilities	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Physical Disabilities	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Significantly Medically Impaired	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Substance Abuse	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Teen Pregnancy/Teen Parenting	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Terminally Ill	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Visually Impaired	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Other Special Needs	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

**Step (7)** The next section is *Special Needs Served*. In this section for each Special Need category, you will enter the number of volunteers, the number of children served at in-home placements, and the number of children served at organizations and not at their home. Click “next” to continue to the next section.

**Step (8)** The last section is *Review and Submit*. In this section, you should click on “*View/Print PRS*” to confirm your responses. **Please review the Checklist on the following page to determine if the Progress Report Supplement is complete and ready to be submitted.**

If you need to change any responses, you can click any of the “*edit*” buttons for the appropriate section.

After any editing, click on the “*View/Print PRS*” again to confirm your answers are correct.

Click “*Submit Progress Report Supplement*” to complete the final step. This step submits your report to your Program Officer in the CNCS State Office.

**Review and Submit**

Please review and submit your information

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**Grant# 13GXSFL001 - FGPF**  
**Due Date:** 11/04/2015  
**Status:** PRS Initial Entry  
**Reporting Period:**10/01/2014 - 09/30/2015

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**Demographics:** [edit](#)

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**Service Information:** [edit](#)

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**Client Information:** [edit](#)

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**Special Needs Served:** [edit](#)

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**Available Actions:** [View/Print PRS](#)

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**Submit Progress Report Supplement** 

**Thank you**

You have successfully completed the action to Submit Progress Report Supplement on 8/1/2014 at 10:11 AM, EDT.

[Return to Progress Report Supplement list](#) 

[Go to your eGrants home](#) 

## FGP PRS Grantee Checklist

- Have you **printed a copy** of the report and **verified the information** before submitting?
- Do all fields contain a number? If no information is available, is a “0” entered?
- Do the totals for all subcategories under **Age Group** equal **Total Number of Volunteers**?
- Do the totals for all subcategories under **Gender** equal **Total Number of Volunteers**?
- Have you entered all available information regarding volunteer numbers in each of the subcategories under **Ethnicity**?
- Have you entered all available information regarding volunteer numbers in each of the subcategories under **Racial Group**?
- Do the totals for all subcategories under **Hours Served** equal **Total Number of Volunteers**?
- Do the totals for all subcategories under **Volunteer Client Ratio** equal **Total Number of Volunteers**?
- Do the entries for the **In Home** column under **Special Needs** reflect the Number of **Children** and **NOT Volunteers**?
- Do the entries for the **Not in Home** column under **Special Needs** reflect the Number of **Children** and **NOT Volunteers**?

\*We understand that some grantees do not collect information related to race and ethnicity. If you do not have data, please enter “0” in these fields.

**Questions?** Please contact your Program Officer in the CNCS State Office.