

DGIS USER GUIDE WORKFORCE FORMS

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WORKFORCE FORMS

Under **Workforce Forms**, the grantee provides information on the personnel contributing to the training projects and participants and beneficiaries of the short-term, medium-term, and long-term training grants:

1. **Short-Term Trainees:** *The grantee provides details on short-term trainees with less than 40 contact hours in the current reporting year.*
2. **Medium-Term Trainees:** *The grantee provides details on medium-term trainees with 40–299 contact hours in the current reporting year.*
3. **Long-Term Trainees:** *The grantee provides details on long-term trainees with 300 or more contact hours in the current reporting year.*
4. **Technical Assistance/Collaboration:** *The grantee identifies the total number of technical assistance and collaboration activities, participants, and the target audience.*
5. **Faculty and Staff:** *The grantee provides details on the faculty, staff, and other personnel contributing to the training project.*
6. **Continuing Education:** *The grantee provides details on continuing education participants in the reporting year.*
7. **Healthy Start Site:** *The grantee provides information on their Healthy Start sites.*
8. **Publications, Conferences, and Web-based Products (Excel Upload):** *The grantee provides information about the publications and web-based products created during the reporting year by uploading an Excel template.*
9. **Products and Submission Data (manual entry):** *The grantee provides details on the products, publications, and submissions addressing maternal and child health that have been published or produced with grant support (either fully or partially) during the reporting period.*
10. **MCH LEAP Training Program - Trainee Information Form:** *The grantee provides details on medium- and long-term LEAP trainees who are participating in the LEAP training program during the 12-month reporting period.*

APPLICABLE REPORT TYPES

Based on the workforce forms assigned to your programs, below is a summary of workforce forms present in each report type.

The report types are as follows:

1. *New Competing Performance Report (NCPR)*
2. *Non-Competing Continuation Performance Report (NCCPR)*
3. *Project Period End Report (PPER)*

Figure 1: Workforce Forms

Workforce Development			
Applicable Forms	Report Types		
	NCPR	NCCPR	PPER
Short-Term Trainees		✓	✓
Medium-Term Trainees		✓	✓
Long-Term Trainees		✓	✓
Technical Assistance/Collaboration		✓	✓
Faculty and Staff		✓	✓
Continuing Education		✓	✓
Healthy Start Site	✓	✓	✓
Former Trainees		✓	✓
Product and Publication 1 and 2		✓	✓
MCH LEAP Training Program - Trainee Information Form		✓	✓

SHORT-TERM TRAINEES

FORM INSTRUCTIONS

SHORT-TERM TRAINEES DETAIL SHEET

The following information is under the **Short-Term Trainee Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. *Definition*

Figure 2: Short-Term Trainees: Detail Sheet

Short-Term Trainees

▶ DG00C Due In: 13 Days | Status: Not Started

▶ Resources [↗](#)

Fields with ★ are required.

▼ Short-Term Trainees Detail Sheet

Definition Short-term trainees are trainees with less than 40 contact hours in the current reporting year. (Continuing Education participants are not counted in this category)

SHORT-TERM TRAINEES DURING THE REPORTING PERIOD

In this section, the grantee must respond to the following questions:

1. *Total Number: The total number of trainees during the reporting period. This is a required field. Enter an integer.*
2. *Disciplines: The grantee must select at least one discipline. Select all that apply.*
3. *Other Disciplines Description (required if you select Other): The grantee may provide a description here.*
4. *Comments: The grantee may provide additional comments here.*

Figure 3: Short-Term Trainees During the Reporting Period

Short-Term Trainees during the reporting period

★ Total number Enter an integer: 0 - 999,999.

Disciplines
(Select all that apply)

- Audiology
- Biological Sciences
- Dentistry-Other
- Dentistry-Pediatric
- Disability Studies
- Education/Special Education
- Epidemiology
- Family Member/Community Member
- Family Studies
- Family/Parent/Youth Advocacy
- Genetics/Genetic Counseling
- Health Administration
- Human Development/Child Development
- Interdisciplinary
- Law
- Medicine-Adolescent Medicine
- Medicine-Developmental-Behavioral Pediatrics
- Medicine-General
- Medicine - Neurodevelopmental Disabilities
- Medicine-Other
- Medicine - Pediatric Pulmonology
- Medicine - Pediatrics

	<input type="checkbox"/> Nursing-Family/Pediatric Nurse Practitioner <input type="checkbox"/> Nursing-Midwife <input type="checkbox"/> Nutrition <input type="checkbox"/> Person with a disability or special health care need <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Psychology <input type="checkbox"/> Public Health <input type="checkbox"/> Respiratory Therapy <input type="checkbox"/> Speech-Language Pathology	<input type="checkbox"/> Nursing-General <input type="checkbox"/> Nursing-Other <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Pharmacy <input type="checkbox"/> Psychiatry <input type="checkbox"/> Public Administration <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Social Work <input type="checkbox"/> Other
'Other' Disciplines Description <i>(Required if you selected 'Other')</i>	<input type="text"/>	
COMMENTS <input type="text"/> 0/5000 characters		

FORM-LEVEL RULES AND VALIDATIONS

1. The Comments text box will accept both text and numerical values (maximum of 5,000 characters).

MEDIUM-TERM TRAINEES

FORM INSTRUCTIONS

MEDIUM-TERM TRAINEES DETAIL SHEET

The following information is under the *Medium-Term Trainees Detail Sheet*. The grantee may expand the accordion menu to view the following details:

1. *Gender Definitions*
2. *Ethnicity Definitions*
3. *Race Definitions*

Figure 4: Medium-Term Trainees: Detail Sheet

The screenshot shows a web interface for 'Medium-Term Trainees'. At the top, there is a header 'Medium-Term Trainees' with a folder icon. Below it, a yellow bar displays 'DG000i' on the left and 'Due In: 13 Days | Status: Not Started' on the right. A 'Resources' link with an external icon is visible. A note states 'Fields with ★ are required.' Below this is an accordion menu titled 'Medium-Term Trainees Detail Sheet'. The menu is expanded to show three sections: 'Gender Definitions', 'Ethnicity Definitions', and 'Race Definitions'. Each section contains a list item with a 'Show more' button. The 'Gender Definitions' section shows a bullet point for 'Male: Cisgender man, describes a person who was assigned male at birth and whose gender identity is a ...'. The 'Ethnicity Definitions' section shows a bullet point for 'Hispanic or Latino includes all individuals of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or ...'. The 'Race Definitions' section shows a bullet point for 'American Indian or Alaska Native includes all individuals who identify with any of the original peoples of North and South America ...'.

The grantee may see two clickable tabs:

40–149 CONTACT HOURS

The grantee may click on this tab and see its content.

TRAINEES WITH 40 – 299 CONTACTS HOURS

In this section, the grantee must respond to the following question(s):

1. *Total Number of Medium-Term Trainees (i.e., cumulative total of trainees from 40-149 and 150-299 Contact Hours.): This section will be automatically populated from the Total Number of Trainees with 40-149 Contact Hours and Total Number of Trainees with 150 – 299 Contact Hours.*

Figure 5: Medium-Term Trainees: 40 - 149 Contact Hours

▶ Medium-Term Trainees Detail Sheet

✕ 40 - 149 Contact Hours

✕ 150 - 299 Contact Hours

Trainees With 40 - 299 Contact Hours

■ Cumulative total of Medium-Term Trainees from 40-149 and 150-299 contact hours.

Total Number of Medium-Term Trainees
(Cumulative total of trainees from 40-149 and 150-299 contact hours.)

200

TRAINEES WITH 40–149 CONTACT HOURS DURING THE REPORTING PERIOD

In this section, the grantee must respond to the following questions:

1. *Total Number: Enter an integer from 0–999,999. This is a required field. The grantee must enter an integer, and this will automatically populate the above section.*
2. *Disciplines: Select all that apply.*
3. *Other Disciplines Description (required if you select Other): The grantee may provide a description.*
4. *Comments: The grantee may provide additional comments here.*

Figure 6: Medium-Term Trainees with 40 - 149 Contact Hours During the Reporting Period

Trainees With 40 - 149 Contact Hours During The Reporting Period

★ Total Number

0

Disciplines
(Select all that apply)

<input type="checkbox"/> Audiology	<input type="checkbox"/> Biological Sciences
<input type="checkbox"/> Dentistry-Other	<input type="checkbox"/> Dentistry-Pediatric
<input type="checkbox"/> Disability Studies	<input type="checkbox"/> Education/Special Education
<input type="checkbox"/> Epidemiology	<input type="checkbox"/> Family Member/Community Member
<input type="checkbox"/> Family Studies	<input type="checkbox"/> Family/Parent/Youth Advocacy
<input type="checkbox"/> Genetics/Genetic Counseling	<input type="checkbox"/> Health Administration
<input type="checkbox"/> Human Development/Child Development	<input type="checkbox"/> Interdisciplinary
<input type="checkbox"/> Law	<input type="checkbox"/> Medicine-Adolescent Medicine
<input type="checkbox"/> Medicine-Developmental-Behavioral Pediatrics	<input type="checkbox"/> Medicine-General
<input type="checkbox"/> Medicine - Neurodevelopmental Disabilities	<input type="checkbox"/> Medicine-Other
<input type="checkbox"/> Medicine - Pediatric Pulmonology	<input type="checkbox"/> Medicine - Pediatrics
<input type="checkbox"/> Nursing-Family/Pediatric Nurse Practitioner	<input type="checkbox"/> Nursing-General
<input type="checkbox"/> Nursing-Midwife	<input type="checkbox"/> Nursing-Other

<input type="checkbox"/> Nutrition	<input type="checkbox"/> Occupational Therapy
<input type="checkbox"/> Person with a disability or special health care need	<input type="checkbox"/> Pharmacy
<input type="checkbox"/> Physical Therapy	<input type="checkbox"/> Psychiatry
<input type="checkbox"/> Psychology	<input type="checkbox"/> Public Administration
<input type="checkbox"/> Public Health	<input type="checkbox"/> Rehabilitation
<input type="checkbox"/> Respiratory Therapy	<input type="checkbox"/> Social Work
<input type="checkbox"/> Speech-Language Pathology	<input type="checkbox"/> Other

'Other' Disciplines Description
(Required if you selected 'Other')

COMMENTS

0/5000 characters

150–299 CONTACT HOURS

The grantee may click on this tab and see its content.

Figure 7: Medium-Term Trainees: 150 - 299 Contact Hours

x 40 - 149 Contact Hours	x 150 - 299 Contact Hours
Trainees With 40 - 299 Contact Hours	
■ Cumulative total of Medium-Term Trainees from 40-149 and 150-299 contact hours.	
Total Number of Medium-Term Trainees <i>(Cumulative total of trainees from 40-149 and 150-299 contact hours.)</i>	200

TRAINEES WITH 40–299 CONTACT HOURS

In this section, the grantee must respond to the following question:

1. **Total Number of Medium-Term Trainees (cumulative total of trainees from 40–149 and 150–299 contact hours.):** This section will be automatically populated from the Total Number of Trainees with 40–149 Contact Hours and Total Number of Trainees with and 150–299 Contact Hours.

Figure 8: Medium-Term Trainees: Trainees With 40 - 299 Contact Hours

Trainees With 40 - 299 Contact Hours	
■ Cumulative total of Medium-Term Trainees from 40-149 and 150-299 contact hours.	
Total Number of Medium-Term Trainees <i>(Cumulative total of trainees from 40-149 and 150-299 contact hours.)</i>	200

TRAINEES WITH 150–299 CONTACT HOURS DURING THE REPORTING PERIOD

In this section, the grantee must respond to the following question(s):

1. *Total Number: The total number of trainees during the reporting period. This is a required field. The grantee must enter an integer, and this will automatically populate the above section.*

Figure 9: Medium-Term Trainees: Trainee With 150 - 299 Contact Hours During the Reporting Period

Trainees With 150 - 299 Contact Hours During The Reporting Period	
■ The totals for gender, ethnicity, race and discipline must equal the total number of medium-term trainees with 150-299 contact hours	
★ Total Number	150

GENDER (NUMBER NOT PERCENT)

1. *Male: Enter an integer from 0–999,999.*
2. *Female: Enter an integer from 0–999,999.*
3. *Transgender Man: Enter an integer from 0-999,999.*
4. *Transgender Woman: Enter an integer from 0-999,999.*
5. *Other: Enter an integer from 0-999,999.*
6. *Choose not to disclose/unrecorded: Enter an integer from 0-999,999.*
7. *Total: This section will be automatically populated as a sum of Male, Female, Transgender Man, Transgender Woman, Other and Choose not to disclose/unrecorded numbers, and this value must match the total number of trainees with 150–299 contact hours.*

NOTE: For the Total section, the total number of the Trainees will be provided in parentheses

Figure 10: Medium-Term Trainees: Gender (Number Not Percent)

Gender (number not percent)	
<p>■ For Gender definitions, please refer the Detail Sheet Section.</p>	
★ Male	<input type="text" value="20"/>
★ Female	<p>⊖ Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Transgender Man	<input type="text" value="30"/>
★ Transgender Woman	<input type="text" value="30"/>
★ Other	<input type="text" value="30"/>
★ Choose not to disclose/unrecorded	<input type="text" value="10"/>
Total	<p>⊕ This value should match the total number of trainees with 150-299 contact hours (150)</p> <input type="text" value="120"/>

ETHNICITY (NUMBER NOT PERCENT)

1. *Hispanic or Latino: Enter an integer from 0–999,999.*
2. *Not Hispanic or Latino: Enter an integer from 0–999,999.*
3. *Unrecorded: Enter an integer from 0–999,999.*
4. *Total: This section will be automatically populated as a sum of Male and Female numbers and this value must match the total number of trainees with 150–299 contact hours.*

NOTE: For *the Total* section, the total number of the *Trainees* will be provided in parentheses.

Figure 11: Medium-Term Trainees: Ethnicity (Number Not Percent)

Ethnicity (number not percent)	
<p>For Ethnicity definitions, please refer the Detail Sheet Section.</p>	
★ Hispanic or Latino	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Not Hispanic or Latino	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Unrecorded	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
Total	<p>This value should match the total number of trainees with 150-299 contact hours (150)</p> <input type="text"/>

RACE (NUMBER NOT PERCENT)

1. American Indian or Alaska Native: Enter an integer from 0–999,999.
2. Asian: Enter an integer from 0–999,999.
3. Black or African American: Enter an integer from 0–999,999.
4. Native Hawaiian or Pacific Islander: Enter an integer from 0–999,999.
5. Unrecorded: Enter an integer from 0–999,999
6. Total: This section will be automatically populated, and this value should match the total number of trainees with 150–299 contact hours (100)

NOTE: For the *Total* section the total number of the Trainees will be provided in the parentheses.

Figure 12: Medium-Term Trainees: Race (number not percent)

Race (number not percent)	
<p>For Race definitions, please refer the Detail Sheet Section.</p>	
* American Indian or Alaska Native	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* Asian	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* Black or African American	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* Native Hawaiian or Other Pacific Islander	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* White	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* More than One Race	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
* Unrecorded	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
Total	<p>This value should match the total number of trainees with 150-299 contact hours (150)</p> <input type="text"/>

DISCIPLINES (NUMBER NOT PERCENT)

The grantee may see a table with the following information:

1. *S. No (Serial Number): This value shows the position of discipline in the series.*
2. *Discipline: The grantee must select a response from the drop-down.*
3. *Other Discipline Description (required if you selected Other): This section will be required if the grantee has selected Other from the Discipline dropdown.*
4. *Number: This value must match the total number of trainees with 150-299 contact hours.*
5. *Action: The grantee may click the X Delete link to delete the entry.*
6. *+ Add Row Button: The grantee may click on this button to add another row to provide information.*

Figure 13: Medium Term Trainees: Disciplines (Number Not Percent)

Disciplines (Number Not Percent)				
S. No.	Discipline	'Other' Discipline Description (Required if you selected Other)	Number	Action
1	Select one <small>✖ Provide a response for this field.</small>		99	✖ Delete
Total			99	<small>✖ This value should match the total number of trainees with 150-299 contact hours (150)</small>

[+ Add Row](#)

Comments

The grantee may provide additional comments.

Figure 14: Medium Term Trainees: Comments

COMMENTS

0/5000 characters

FORM-LEVEL RULES AND VALIDATIONS

1. The Comments text box will accept both text and numerical values (maximum of 5,000 characters).

LONG-TERM TRAINEES

FORM INSTRUCTIONS

LONG-TERM TRAINEES DETAIL SHEET

The following information is under the **Long-Term Trainees Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. *Long-Term Trainees Definition*
2. *Gender Definitions*
3. *Ethnicity Definitions*
4. *Race Definitions*

Figure 15: Long-Term Trainees: Detail Sheet

Long-Term Trainees

▶ DG000(Due In: 13 Days | Status: Not Started

▶ Resources [↗](#)

Fields with ★ are required.

▼ Long-Term Trainees Detail Sheet

Long-Term Trainees Definition	It is defined as trainees (those with greater than or equal to 300 contact hours within the training program) benefiting from the training grant (including those who received MCH funds and those who did not).
Gender Definitions	<ul style="list-style-type: none"> Male: Cisgender man, describes a person who was assigned male at birth and whose gender identity is a man/male. Female: Cisgender woman, describes a person who was assigned female at birth and whose gender identity is a woman/female. Transgender Man/Transgender Male/Transgender Masculine: Describes a person who is transgender and whose gender identity is boy/man/male. Transgender Woman/Transgender Female/Transgender Feminine: Describes a person who is transgender and whose gender identity is girl/woman/female. Other (specify): A gender identity that does not fit into the above categories, such as nonbinary (a person whose gender identity falls outside of the traditional gender binary structure of girl/woman and boy/man), agender (a person who identifies as having no gender, or who does not experience gender as a primary identity component), or another identity.
Ethnicity Definitions	<ul style="list-style-type: none"> Hispanic or Latino includes all individuals of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. People who identify as Hispanic, Latino, or Spanish may be any race.
Race Definitions	<ul style="list-style-type: none"> American Indian or Alaska Native includes all individuals who identify with any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. It includes people who identify as "American Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome Eskimo Community. Asian includes all individuals who identify with one or more nationalities or ethnic groups originating in the Far East, Southeast Asia, or the Indian subcontinent. Examples of these groups include, but are not limited to, Chinese, Filipino, Asian Indian, Vietnamese, Korean, and Japanese. The category also includes groups such as Pakistani, Cambodian, Hmong, Thai, Bengali, Mien, etc. Black or African American includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, and Somali. The category also includes groups such as Ghanaian, South African, Barbadian, Kenyan, Liberian, and Bahamian. Native Hawaiian and Pacific Islander includes all individuals who identify with one or more nationalities or ethnic groups originating in Hawaii, Guam, Samoa, or other Pacific Islands. Examples of these groups include, but are not limited to, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, and Marshallese. The category also includes groups such as Palauan, Tahitian, Chuukese, Pohnpeian, Saipanese, Yapese, etc. White includes all individuals who identify with one or more nationalities or ethnic groups originating in Europe, the Middle East, or North Africa. Examples of these groups include, but are not limited to, German, Irish, English, Italian, Lebanese, Egyptian, Polish, French, Iranian, Slavic, Cajun, and Chaldean.

LONG-TERM TRAINEES TRAINING PROGRAM INFORMATION

In this section, the grantee responds to the following questions:

1. **Total Number of Long-Term Trainees:** The total of this will be automatically populated as the grantee enters the information in the table below, which has the following column names:
 - a. Name
 - b. Gender
 - c. Other Gender Description
 - d. Ethnicity
 - e. Race
 - f. Status
 - g. Action: The grantee may click on the X Delete link to delete the entire row or the Edit link to edit previously added information.
2. **Add New button:** The grantee can click on this button, and it will open a new form with header **Long Term Trainees Training Program Information**.

Figure 16: Long-Term Trainees: Long-Term Trainees Training Program Information

Long-Term Trainees Training Program Information

■ All long-term trainees participating in the program, whether receiving MCH stipend support or not. The status indicator represents the completion of all required fields within a long-term trainee record.

Total Number Of Long-Term Trainees: 1

	Name	Gender	Other Gender Description <small>(Required if you selected 'Other')</small>	Ethnicity	Race	Status	Action
▶	test	Male		Not Hispanic or Latino	White	✔ Complete	✎ Edit ✕ Delete

LONG-TERM TRAINEES

1. **Trainee Demographics:** The grantee may enter the following information:
 - a. **Name:** This is a required field, and the grantee must provide a response.
 - b. **Gender:** This is a required field, and the grantee must select a response from the dropdown menu.
 - c. **Other Gender Description (required if you selected Other):** The grantee may provide a response in the textbox.
 - d. **Ethnicity:** This is a required field, and the grantee must select a response from the dropdown.
 - e. **Race:** This is a required field, and the grantee must select a response from the dropdown.
 - f. **Country:** The grantee may select a response from the dropdown menu.
 - g. **State:** The grantee may select a response from the dropdown menu.
 - h. **Other International Address Description (required if you selected International Address):** The grantee may provide a response in the textbox.
 - i. **City:** The grantee may provide a response in the textbox.





- j. *Discipline: This is a required field, and the grantee must select a response from the dropdown menu.*
- k. *Other Discipline Description (required if you selected Other): The grantee may provide a response in the textbox.*
- l. *Degree: This is a required field, and the grantee must select a response from the dropdown menu.*
- m. *Other Degree Description (required if you selected Other): The grantee may provide a response in the text box.*
- n. *Degree Program in Which Enrolled: The grantee may provide a response in the text box.*
- o. *Received Financial MCH Support: This is a required field, and the grantee must select a response from the dropdown menu.*
- p. *If Yes, Indicate Amount: The grantee may provide a response in the textbox.*
- q. *If Yes, Indicate Type: The grantee must select a response from the dropdown menu.*
- r. *Other Type Description (required if you selected Other): The grantee may provide a response in the text box*
- s. *Student Status: The grantee must select a response from the dropdown menu.*
- t. *Length of Time Receiving Support (required for Postdoctoral Fellows and Epidemiology Doctoral Training Program fellows only)*
- u. *Research Topic or Title (required for Postdoctoral Fellows and Epidemiology Doctoral Training Program fellows only)*

Figure 17: Long-Term Trainees: Trainee Demographics

Long-Term Trainee ✕

Trainee Details

<p>★ Name</p>	<p>ⓘ Provide a response for this field</p> <input style="width: 100%; height: 25px;" type="text"/>
<p>★ Gender <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>
<p>Other Gender Description <i>(Required if you selected 'Other')</i></p>	<input style="width: 100%; height: 25px;" type="text"/>
<p>★ Ethnicity <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>
<p>★ Race <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>

Country	Select one ▼
State	Select one ▼
Other International Address Description <i>(Required if you selected 'International Address')</i>	<input type="text"/>
City	<input type="text"/>
★ Discipline	 Provide a response for this field Select one ▼
Other Discipline Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Degree	 Provide a response for this field Select one ▼
Other Degree Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Degree Program in which enrolled	 Provide a response for this field <input type="text"/>
★ Received Financial MCH Support?	 Provide a response for this field Select one ▼
If yes, indicate amount	<input type="text"/>
If yes, indicate type	Select one ▼
Other Type Description <i>(Required if you selected 'Other')</i>	<input type="text"/>

★ Student Type	! Provide a response for this field Select one ▼
Other Student Type Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Student Status	! Provide a response for this field Select one ▼
Length of time receiving support <i>(Postdoctoral Fellows and Epidemiology Doctoral Training Program fellows, please specify)</i>	<input type="text"/>
Research Topic or Title <i>(Postdoctoral Fellows and Epidemiology Doctoral Training Program fellows, please specify)</i>	<input type="text"/>

Cancel Save and Close

COMMENTS

The grantee may provide additional comments here.

Figure 18: Long-Term Trainees: Comments

COMMENTS

0/5000 characters

FORM-LEVEL RULES AND VALIDATIONS

1. The Comments text box will accept both text and numerical values (maximum of 5,000 characters).

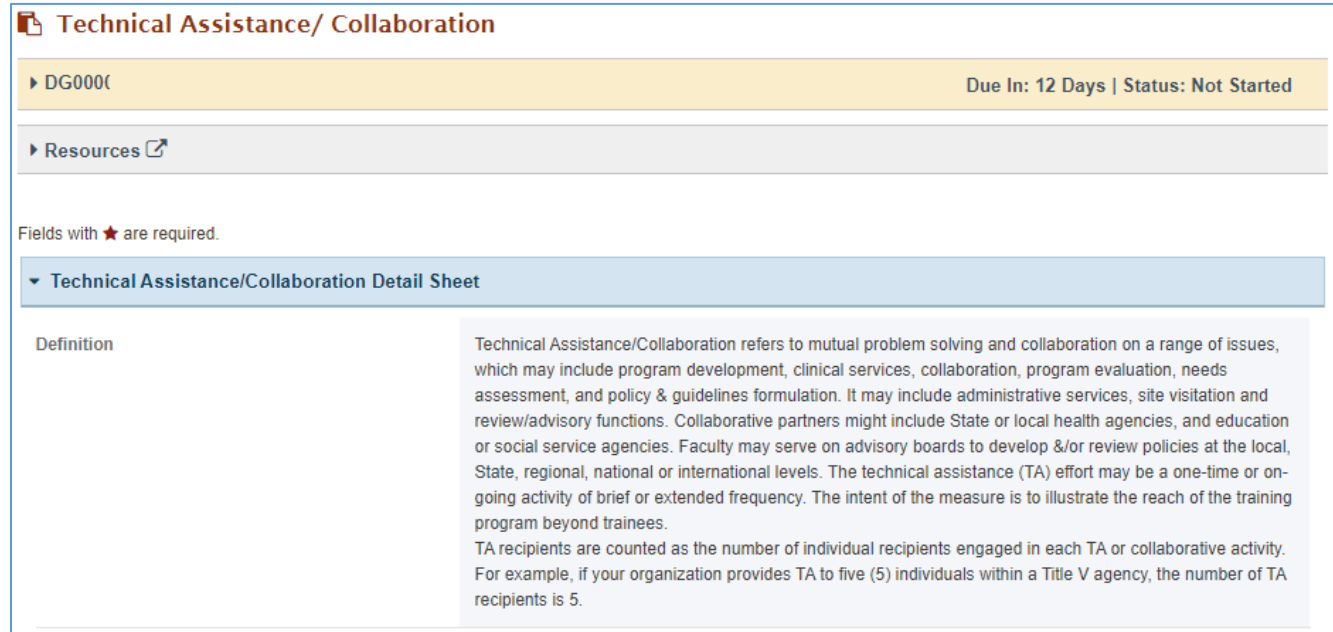
TECHNICAL ASSISTANCE/COLLABORATION

FORM INSTRUCTIONS

TECHNICAL ASSISTANCE/COLLABORATION DETAIL SHEET

The following information is under the **Technical Assistance/Collaboration Detail Sheet**. The grantee may expand the accordion menu to view the *Definition*, as shown in figure 194.

Figure 19: Technical Assistance/Collaboration: Detail Sheet



Technical Assistance/ Collaboration

▶ DG0000 Due In: 12 Days | Status: Not Started

▶ Resources [↗](#)

Fields with ★ are required.

▼ **Technical Assistance/Collaboration Detail Sheet**

Definition

Technical Assistance/Collaboration refers to mutual problem solving and collaboration on a range of issues, which may include program development, clinical services, collaboration, program evaluation, needs assessment, and policy & guidelines formulation. It may include administrative services, site visitation and review/advisory functions. Collaborative partners might include State or local health agencies, and education or social service agencies. Faculty may serve on advisory boards to develop &/or review policies at the local, State, regional, national or international levels. The technical assistance (TA) effort may be a one-time or on-going activity of brief or extended frequency. The intent of the measure is to illustrate the reach of the training program beyond trainees. TA recipients are counted as the number of individual recipients engaged in each TA or collaborative activity. For example, if your organization provides TA to five (5) individuals within a Title V agency, the number of TA recipients is 5.

There are three tabs collecting information on the *TA/Collaboration Activities, Details, and Emerging Issues*. Further details about these tabs will be provided in the following sections.

PART A – TA/COLLABORATION ACTIVITIES (REQUIRED)

The grantee may click on this tab and see several field options, which are described in more detail in the outline below. Provide the following summary information on all TA provided:

1. *Total Number of Technical Assistance/Collaboration Activities: Enter an integer from 0 – 999,999. This is a required field.*
2. *Total Number of Technical Assistance Participants: Enter an integer from 0 – 999,999.*
3. *TA Activities by Type of Recipient: Select all that apply.*
4. *Other TA Activities by Type of Recipient: This is only required if you selected Other.*

Figure 20: Technical Assistance/Collaboration: Part A – TA/Collaboration Activities

✖ Part A - TA/Collaboration Activities ✖ Part B - TA/Collaboration Activity Detail ✖ Part C - TA Emerging Issues																					
Provide The Following Summary Information On ALL TA Provided																					
* Total Number of Technical Assistance/Collaboration Activities	10																				
* Total Number of Technical Assistance Participants	12																				
TA Activities by Type of Recipient <i>(Select all that apply)</i>	<table border="0"> <tr> <td><input checked="" type="checkbox"/> Other Divisions/Departments in a University</td> <td><input type="checkbox"/> Title V (MCH Programs)</td> </tr> <tr> <td><input checked="" type="checkbox"/> Education</td> <td><input type="checkbox"/> State Health Department</td> </tr> <tr> <td><input checked="" type="checkbox"/> Health Insurance/Organization</td> <td><input type="checkbox"/> Medicaid Agency</td> </tr> <tr> <td><input checked="" type="checkbox"/> Social Service Agency</td> <td><input type="checkbox"/> Mental Health Agency</td> </tr> <tr> <td><input checked="" type="checkbox"/> State Adolescent Health</td> <td><input type="checkbox"/> Juvenile Justice or other Legal Entity</td> </tr> <tr> <td><input checked="" type="checkbox"/> Developmental Disability Agency</td> <td><input type="checkbox"/> Early Intervention</td> </tr> <tr> <td><input checked="" type="checkbox"/> Other Government Agencies</td> <td><input type="checkbox"/> Family and/or Consumer Group</td> </tr> <tr> <td><input checked="" type="checkbox"/> Mixed Agencies</td> <td><input type="checkbox"/> Professional Organizations/Associations</td> </tr> <tr> <td><input checked="" type="checkbox"/> Foundations</td> <td><input type="checkbox"/> Clinical Programs/Hospitals</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Other Divisions/Departments in a University	<input type="checkbox"/> Title V (MCH Programs)	<input checked="" type="checkbox"/> Education	<input type="checkbox"/> State Health Department	<input checked="" type="checkbox"/> Health Insurance/Organization	<input type="checkbox"/> Medicaid Agency	<input checked="" type="checkbox"/> Social Service Agency	<input type="checkbox"/> Mental Health Agency	<input checked="" type="checkbox"/> State Adolescent Health	<input type="checkbox"/> Juvenile Justice or other Legal Entity	<input checked="" type="checkbox"/> Developmental Disability Agency	<input type="checkbox"/> Early Intervention	<input checked="" type="checkbox"/> Other Government Agencies	<input type="checkbox"/> Family and/or Consumer Group	<input checked="" type="checkbox"/> Mixed Agencies	<input type="checkbox"/> Professional Organizations/Associations	<input checked="" type="checkbox"/> Foundations	<input type="checkbox"/> Clinical Programs/Hospitals	<input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Other Divisions/Departments in a University	<input type="checkbox"/> Title V (MCH Programs)																				
<input checked="" type="checkbox"/> Education	<input type="checkbox"/> State Health Department																				
<input checked="" type="checkbox"/> Health Insurance/Organization	<input type="checkbox"/> Medicaid Agency																				
<input checked="" type="checkbox"/> Social Service Agency	<input type="checkbox"/> Mental Health Agency																				
<input checked="" type="checkbox"/> State Adolescent Health	<input type="checkbox"/> Juvenile Justice or other Legal Entity																				
<input checked="" type="checkbox"/> Developmental Disability Agency	<input type="checkbox"/> Early Intervention																				
<input checked="" type="checkbox"/> Other Government Agencies	<input type="checkbox"/> Family and/or Consumer Group																				
<input checked="" type="checkbox"/> Mixed Agencies	<input type="checkbox"/> Professional Organizations/Associations																				
<input checked="" type="checkbox"/> Foundations	<input type="checkbox"/> Clinical Programs/Hospitals																				
<input type="checkbox"/> Other																					
Other TA Activities by Type of Recipient <i>(Required if you selected *Other*)</i>																					

NUMBER OF PRIMARY TARGET AUDIENCE (REQUIRED)

The grantee will see a table with the following columns: *Target Audience*, *Number of TA Activities*, and *Percentage of TA Activities*. The grantee must provide the below information under the *Number of TA Activities* column:

1. *Local: Enter an integer from 0–999,999.*
2. *Title V: Enter an integer from 0–999,999.*
3. *Within State: Enter an integer from 0–999,999.*
4. *Another State: Enter an integer from 0–999,999.*
5. *Regional: Enter an integer from 0–999,999.*
6. *National: Enter an integer from 0–999,999.*
7. *International: Enter an integer from 0–999,999.*
8. *Total: This will be automatically populated. (NOTE: The Total should match the value in section A, TA/Collaboration Activities.)*

NOTE: The grantee will enter the *Number of TA Activities* by target audience, and percentages will be automatically calculated.

Figure 21: Technical Assistance/Collaboration: Number of Primary Target Audience

Number Of Primary Target Audience		
Target Audience	Number of TA Activities	Percent of TA Activities
Local	1	9.09
Title V	2	18.18
Within State	3	27.27
Another State	4	36.36
Regional	1	9.09
National	0	0
International	0	0
Total	11 ✖ This value should match the value in Section A, TA/Collaboration Activities (10)	100

COMMENTS

The grantee may provide additional comments here.

Figure 22: Technical Assistance/Collaboration: Comments

COMMENTS

0/5000 characters

PART B – TA/COLLABORATION ACTIVITY DETAIL (REQUIRED)

The grantee may click on this tab and see a *Technical Assistance/Collaborative Activities* table with the following information:

1. *Title: The grantee must provide a response.*
2. *List A Topics: The grantee must select a response from the dropdown menu. Select all that apply.*
3. *List B Topics: The grantee must select a response from the dropdown menu.*
4. *Other: A response is required if Other has been selected from the previous dropdown menu.*
5. *Recipient of TA/Collaborator: The grantee must select a response from the dropdown menu. Select all that apply.*
6. *Other Recipient Description: A response is required if Other has been selected from the previous dropdown menu.*
7. *Intensity of TA: The grantee must select a response from the dropdown menu.*
8. *Primary Target Audience: The grantee must select a response from the dropdown menu.*
9. *Action: The grantee may click on the X Delete link to delete the entire row.*
10. *+ Add Row button: The grantee may click on this button to add a new row to add the information.*

Figure 23: Technical Assistance/Collaboration: TA/Collaboration Activity Detail

✖ Part A - TA/Collaboration Activities
✖ Part B - TA/Collaboration Activity Detail
✔ Part C - TA Emerging Issues

Technical Assistance/Collaborative Activities

Provide information below on the 5-10 most significant technical assistance/collaborative activities in the past year. In the notes, briefly state why these were the most significant TA events.

Total Number Of Activities: 1

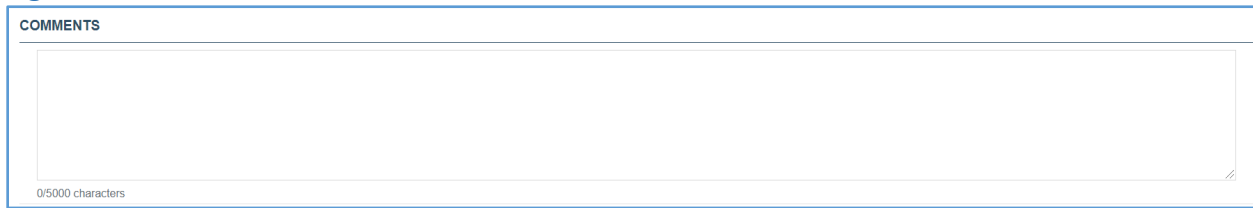
Title	List A Topics	List B Topics (select all that apply)	Other	Recipient of TA/Collaborator (select all that apply)	Other Recipient Description (Required if you selected Other)	Intensity of TA	Primary Target Audience	Action
<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">0/500 characters</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">Select One ▾</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">Selected (0) ▾</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">Selected (0) ▾</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">Select One ▾</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px;">Select One ▾</div>	<div style="border-bottom: 1px solid #ccc; height: 15px; width: 100%;"></div> <div style="font-size: 8px; margin-top: 5px; text-align: right;">✕ Delete</div>
<div style="display: flex; align-items: center;"> ! Provide a response for this field. </div>	<div style="display: flex; align-items: center;"> ! You are required to select at least one topic. </div>	<div style="display: flex; align-items: center;"> ! You are required to select at least one recipient. </div>	<div style="display: flex; align-items: center;"> ! Provide a response for this field. </div>	<div style="display: flex; align-items: center;"> ! Provide a response for this field. </div>		<div style="display: flex; align-items: center;"> ! Provide a response for this field. </div>		

+ Add Row

COMMENTS

The grantee may provide additional comments here.

Figure 24: Technical Assistance/Collaboration: Comments



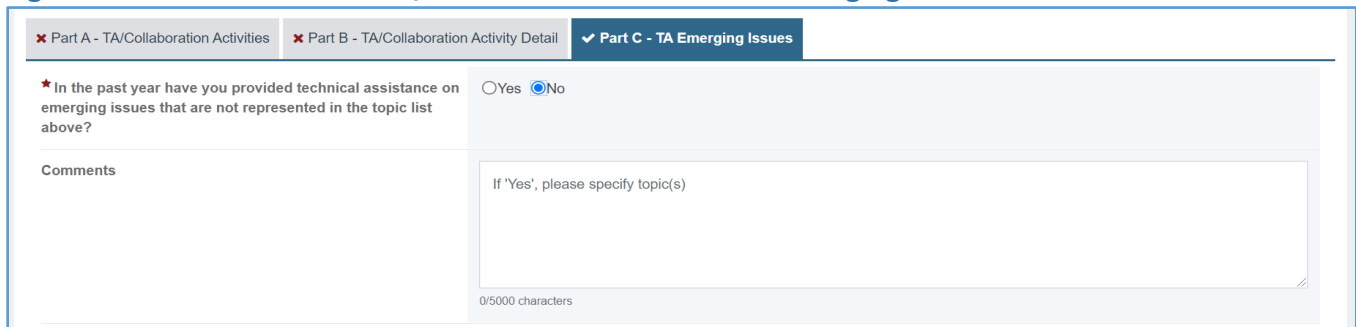
A screenshot of a form field labeled 'COMMENTS'. The field is a large, empty rectangular box with a thin border. Below the box, the text '0/5000 characters' is displayed.

PART C – TA EMERGING ISSUES

The grantee may click on this tab and see the following information:

1. *In the past year, have you provided technical assistance on emerging issues that are not presented in the topic list above? The grantee may select either Yes or No. (NOTE: If the grantee selects Yes, then the Comments field becomes required.)*

Figure 25: Technical Assistance/Collaboration: Part C – TA Emerging Issues



A screenshot of a web form interface. At the top, there are three tabs: 'Part A - TA/Collaboration Activities' (with a red 'x'), 'Part B - TA/Collaboration Activity Detail' (with a red 'x'), and 'Part C - TA Emerging Issues' (with a checkmark). Below the tabs, there is a question: '★ In the past year have you provided technical assistance on emerging issues that are not represented in the topic list above?'. To the right of the question are two radio buttons: 'Yes' (unselected) and 'No' (selected). Below the question is a 'Comments' text box. Inside the text box, there is a placeholder text: 'If 'Yes', please specify topic(s)'. At the bottom of the text box, the text '0/5000 characters' is displayed.

FORM-LEVEL RULES AND VALIDATIONS

1. *The Comments text box will accept both text and numerical values (maximum of 5,000 characters).*
2. *On Part A – TA/Collaboration Activities Tab, if Total Number of Technical Assistance/Collaboration Activities value is 0,*
 - a. *The “Number of TA Activities” column fields under the table “Number of Primary Target Audience” will be read-only.*
 - b. *Grantee will no longer be required to enter Zeros to that column.*

FACULTY AND STAFF

FORM INSTRUCTIONS

There are three tabs collecting information on **Faculty, Staff, and Other**. Further details about these tabs will be provided in the following sections.

FACULTY

The grantee may click on this tab to view its contents and see a table with the following columns:

1. The grantee may click on this tab to view its contents and see a table with the following columns:
 - a. *Name*
 - b. *Gender*
 - c. *Other Gender Description*
 - d. *Ethnicity*
 - e. *Race*
 - f. *Status*
 - g. *Action*: The grantee may click on the *X Delete* link to delete the entire row or the *Edit* link to edit previously added information.
2. *+ Add Row*: The grantee can click on this button, and it will open a new form with header *Faculty & Staff Details*.
3. *Comments*: The grantee may provide comments here.

Figure 26: Faculty and Staff: Faculty

Faculty & Staff Due In: 63 Days | Status: In Progress

▶ DG0001

▶ Resources [↗](#)

▶ Faculty and Staff Detail Sheet

✖ Faculty (0)
✖ Staff (0)
✖ Other (0)

List all personnel (faculty, staff, and others) contributing¹ to your training project, including those listed in the budget form and budget narrative and others that your program considers to have a central and ongoing role in the leadership training program whether they are supported or not supported by the grant.

Faculty Information

You are required to provide information for at least one Faculty, Staff, or Other personnel type.

Name	Gender	Other Gender Description <small>(Required if you selected 'Other')</small>	Ethnicity	Race	Status	Action
+ Add New						

COMMENTS

0/5000 characters

FACULTY DETAILS

Faculty Demographics: In this section, the grantee responds to the following questions:

1. *Name (required)*: The grantee must enter a response.
2. *Gender (required)*: The grantee must select a response from the dropdown menu.
3. *Other Gender Description (Required if you selected 'Other')*: The grantee may provide a response in the textbox.
4. *Ethnicity (required)*: The grantee must select a response from the dropdown menu.
5. *Race (required)*: The grantee must select a response from the dropdown menu.
6. *Discipline (required)*: The grantee must select a response from the dropdown menu.
7. *Other Discipline Description (This is required only if you selected Other)*: The grantee may provide a response in the textbox.
8. *Year Hired in MCH Leadership Training Program (required)*: The grantee must enter a response.
9. *Former MCHB Trainee (required)*: The grantee must select a response from the dropdown menu.

Figure 27: Faculty and Staff: Faculty Details

The screenshot shows a web form titled "Faculty & Staff" with a sub-section "Faculty & Staff Details". The form contains several required fields, each with a red star icon and a yellow information icon. The fields are:

- Name**: A text input field with a message "Provide a response for this field."
- Gender**: A dropdown menu with "Select one" and a downward arrow. A message "Provide a response for this field." is shown. A note below reads "(Refer to Detail Sheet for Definitions.)".
- Other Gender Description**: A text input field with a message "Provide a response for this field." and a note below reads "(Required if you selected 'Other')".
- Ethnicity**: A dropdown menu with "Select one" and a downward arrow. A message "Provide a response for this field." is shown. A note below reads "(Refer to Detail Sheet for Definitions.)".
- Race**: A dropdown menu with "Select one" and a downward arrow. A message "Provide a response for this field." is shown. A note below reads "(Refer to Detail Sheet for Definitions.)".
- Discipline**: A dropdown menu with "Select one" and a downward arrow. A message "Provide a response for this field." is shown.

Other Discipline Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Year Hired in MCH Leadership Training Program	<p>! Provide an appropriate four digit year.</p> <input type="text" value="YYYY"/>
★ Former MCHB Trainee?	<p>! Provide a response for this field.</p> <input type="text" value="v"/>

STAFF

- The grantee may click on this tab to view its contents and see a table with the following columns:
 - Name
 - Gender
 - Other Gender Description
 - Ethnicity
 - Race
 - Status
 - Action: The grantee may click on the *X Delete* link to delete the entire row or the *Edit* link to edit previously added information.
- + Add Row:** The grantee can click on this button, and it will open a new form with header *Faculty & Staff Details*.
- Comments:** The grantee may provide comments here.

Figure 28: Faculty and Staff: Staff

✖ Faculty (0)
★ Staff (0)
✖ Other (0)

■ List all personnel (faculty, staff, and others) contributing¹ to your training project, including those listed in the budget form and budget narrative and others that your program considers to have a central and ongoing role in the leadership training program whether they are supported or not supported by the grant.

Staff Information

! You are required to provide information for at least one Faculty, Staff, or Other personnel type.

	Name	Gender	Other Gender Description (Required if you selected Other)	Ethnicity	Race	Status	Action
<div style="display: flex; align-items: center;"> + Add New </div>							

COMMENTS

0/5000 characters

STAFF DETAILS

Staff Demographics: In this section, the grantee responds to the following questions:

1. *Name (required)*: The grantee must enter a response.
2. *Gender (required)*: The grantee must select a response from the dropdown menu.
3. *Other Gender Description (Required if you selected 'Other')*: The grantee may provide a response in the textbox.
4. *Ethnicity (required)*: The grantee must select a response from the dropdown menu.
5. *Race (required)*: The grantee must select a response from the dropdown menu.
6. *Discipline (required)*: The grantee must select a response from the dropdown menu.
7. *Other Discipline Description (This is required only if you selected Other)*: The grantee may provide a response in the textbox.
8. *Year Hired in MCH Leadership Training Program (required)*: The grantee must enter a response.
9. *Former MCHB Trainee (required)*: The grantee must select a response from the dropdown menu.

Figure 29: Faculty and Staff: Staff Details

Faculty & Staff
✕

Faculty & Staff Details

<p>★ Name</p>	<p>ⓘ Provide a response for this field.</p> <input style="width: 100%; height: 25px;" type="text"/>
<p>★ Gender <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>
<p>Other Gender Description <i>(Required if you selected 'Other')</i></p>	<input style="width: 100%; height: 25px;" type="text"/>
<p>★ Ethnicity <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>
<p>★ Race <i>(Refer to Detail Sheet for Definitions.)</i></p>	<p>ⓘ Provide a response for this field.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>
<p>★ Discipline</p>	<p>ⓘ Provide a response for this field.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> Select one ▼ </div>

<p>Other Discipline Description <i>(Required if you selected 'Other')</i></p>	<input style="width: 100%; height: 25px;" type="text"/>
<p>★ Year Hired in MCH Leadership Training Program</p>	<p>ⓘ Provide an appropriate four digit year.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> YYYY </div>
<p>★ Former MCHB Trainee?</p>	<p>ⓘ Provide a response for this field.</p> <div style="border: 1px solid #ccc; padding: 2px; display: flex; justify-content: space-between; align-items: center;"> ▼ </div>

OTHER

The grantee may click on this tab to see a table with the following columns:

1. The grantee may click on this tab to view its contents and see a table with the following columns:
 - a. *Name*
 - b. *Gender*

- c. *Other Gender Description*
 - d. *Ethnicity*
 - e. *Race*
 - f. *Status*
 - g. *Action*: The grantee may click on the *X Delete* link to delete the entire row or the *Edit* link to edit previously added information.
2. *+ Add Row*: The grantee can click on this button, and it will open a new form with header *Faculty & Staff Details*.
 3. *Comments*: The grantee may provide comments here.

Figure 30: Faculty and Staff: Other

✖ Faculty (0)
✖ Staff (0)
✖ Other (0)

■ List all personnel (faculty, staff, and others) contributing¹ to your training project, including those listed in the budget form and budget narrative and others that your program considers to have a central and ongoing role in the leadership training program whether they are supported or not supported by the grant.

Other Information

ⓘ You are required to provide information for at least one Faculty, Staff, or Other personnel type.

	Name	Gender	Other Gender Description (Required if you selected Other)	Ethnicity	Race	Status	Action
+ Add New							

COMMENTS

0/5000 characters

OTHER DETAIL

Other Demographics: In this section, the grantee responds to the following questions:

1. *Name (required)*: The grantee must enter a response.
2. *Gender (required)*: The grantee must select a response from the dropdown menu.
3. *Other Gender Description (Required if you selected 'Other')*: The grantee may provide a response in the textbox.
4. *Ethnicity (required)*: The grantee must select a response from the dropdown menu.
5. *Race (required)*: The grantee must select a response from the dropdown menu.
6. *Discipline (required)*: The grantee must select a response from the dropdown menu.
7. *Other Discipline Description (This is required only if you selected Other)*: The grantee may provide a response in the textbox.
8. *Year Hired in MCH Leadership Training Program (required)*: The grantee must enter a response.
9. *Former MCHB Trainee (required)*: The grantee must select a response from the dropdown menu.

Figure 31: Faculty and Staff: Other Details

Faculty & Staff	
Faculty & Staff Details	
★ Name	! Provide a response for this field. <input type="text"/>
★ Gender <i>(Refer to Detail Sheet for Definitions.)</i>	! Provide a response for this field. Select one <input type="button" value="v"/>
Other Gender Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Ethnicity <i>(Refer to Detail Sheet for Definitions.)</i>	! Provide a response for this field. Select one <input type="button" value="v"/>
★ Race <i>(Refer to Detail Sheet for Definitions.)</i>	! Provide a response for this field. Select one <input type="button" value="v"/>
★ Discipline	! Provide a response for this field. Select one <input type="button" value="v"/>
Other Discipline Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Year Hired in MCH Leadership Training Program	! Provide an appropriate four digit year. <input type="text" value="YYYY"/>
★ Former MCHB Trainee?	! Provide a response for this field. <input type="button" value="v"/>

FORM-LEVEL RULES AND VALIDATIONS

1. The Comments text box will accept both text and numerical values (maximum of 5,000 characters).

CONTINUING EDUCATION

FORM INSTRUCTIONS

CONTINUING EDUCATION DETAIL SHEET

The following information is under the **Continuing Education Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. *Continuing Education Definition*

Figure 32: Former Trainees: Detail Sheet

Continuing Education

▶ DG000 Due In: 10 Days | Status: Not Started

▶ Resources [↗](#)

Fields with ★ are required.

▼ **Continuing Education Detail Sheet**

Continuing Education Definition	Continuing Education is defined as continuing education programs or trainings that serve to enhance the knowledge and/or maintain the credentials and licensure of professional providers. Training may also serve to enhance the knowledge base of community outreach workers, families, and other members who directly serve the community. Additional details about CE activities will be collected in the annual progress report. NOTE: Short-term trainees are not considered CE participants.
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PART A – CE ACTIVITIES PROVIDED THROUGH YOUR PROGRAM FOR THE REPORTING PERIOD

In this section, the grantee must respond to the following questions:

1. *Total Number of CE Participants (required): Enter an integer from 0–999,999.*
2. *Total Number of CE Sessions/Activities (required): Enter an integer from 0–999,999. This value should be less than or equal to total number of CE Participants.*

NOTE: For the Total Number of CE Sessions/Activities section, the total number of CE Participants will be provided in parentheses.

Figure 33: Part A – CE Activities Provided through your Program for the reporting period

Part A - CE Activities Provided through your Program for the reporting period

★ Total Number of CE Participants	<input type="text" value="4"/>
★ Total Number of CE Sessions/Activities	⚠ This value should be less than or equal to total number of CE participants (4)

CE SESSIONS/ACTIVITIES BY PRIMARY TARGET AUDIENCE

In this section, the grantee may respond to the following question(s):

1. *Number of Within Your State CE Activities: Enter an integer from 0–999,999.*
2. *Number of CE Activities With Another State: Enter an integer from 0–999,999.*

3. *Number of Regional CE Activities: Enter an integer from 0–999,999.*
4. *Number of National CE Activities: Enter an integer from 0–999,999.*
5. *Number of International CE Activities: Enter an integer from 0–999,999.*
6. *Total CE Sessions/Activities: This section will be automatically populated, and this value should match the Total Number of CE Sessions/Activities.*

NOTE: For Total CE Sessions/Activities section, the total number of CE Sessions/Activities will be provided in parentheses.

Figure 34: CE Sessions/Activities by Primary Target Audience

CE Sessions/Activities by Primary Target Audience	
Number of Within Your State CE Activities	<input type="text" value="1"/>
Number of CE Activities With Another State	<input type="text"/>
Number of Regional CE Activities	<input type="text"/>
Number of National CE Activities	<input type="text"/>
Number of International CE Activities	<input type="text"/>
Total CE Sessions/Activities	✖ This value should match the total number of CE Sessions/Activities (2) <input type="text" value="1"/>

CE SESSIONS/ACTIVITIES FOR WHICH CREDITS ARE PROVIDED

In this section, the grantee must respond to the following question:

1. *Number of CE Sessions/ Activities for which Credits are Provided (required): Enter an integer from 0–999,999. This value should be less than or equal to total number of CE Sessions/Activities.*

NOTE: For Number of CE Sessions/ Activities for which Credits are Provided section, the total number of CE Sessions/Activities will be provided in parentheses.

Figure 35: CE Sessions/Activities by Primary Target Audience

CE Sessions/Activities for which Credits are Provided	
★ Number of CE Sessions/ Activities for which Credits are Provided	✖ This value should be less than or equal to total number of CE Sessions/Activities (2) <input type="text"/>

PART B - TOPICS COVERED IN CE ACTIVITIES

In this section, the grantee must respond to the following question(s) if you have indicated CE participant in Part A.

1. *Topics List: Select the topic(s) covered in CE activities. Select all that apply.*
2. *Other Topics Description (required if you select Other): The grantee may provide a description here.*

Figure 36: Part B - Topics Covered in CE Activities

Part B - Topics Covered in CE Activities

This section is only required when you have indicated CE participants above.

Topics List
(Select all that apply)

Clinical Care-Related (including medical home)
 Data, Research, Evaluation
 Methods (Knowledge Translation)
 Interdisciplinary Teaming
 Policy
 Systems Development/Improvement
 Early Childhood Health/Development (birth to school age)
 Adolescent Health
 Autism
 Health Information Technology
 Nutrition
 Patient Safety
 Health Equity
 Other

Diversity or Cultural Responsiveness-Related
 Family Involvement
 Healthcare Workforce Leadership
 Prevention
 Women's Reproductive/Perinatal Health
 School Age Children
 CSHCN/Developmental Disabilities
 Emergency Preparedness
 Mental Health
 Oral Health
 Respiratory Health
 Health Care Financing

'Other' Topics Description
(Required if you selected 'Other')

COMMENTS

The grantee may provide additional comments here.

Figure 37: Continuing Education: Comments

COMMENTS

0/5000 characters

FORM-LEVEL RULES AND VALIDATIONS

1. *The Comments text box will accept both text and numerical values (maximum of 5,000 characters).*

HEALTHY START SITE

FORM INSTRUCTIONS

SECTION 1: GRANTEE PRIMARY ORGANIZATION INFORMATION

In this section grantee must respond to following question(s):

1. *Street Address*: This is a required field. Grantee must enter the street address of the organization.
2. *City*: This is a required field. Grantee must enter the city name of the organization.
3. *State*: This is required field. Grantee must select the organization state from the drop-down.
4. *Zip Code*: This is a required field. Grantee must enter the organization zip code.
5. *Select the state(s) in this organization's service area*: This is a required field. Using the drop-down, grantee must indicate what state(s) are included in its service area. Grantee must select at least one state.
6. *Service area for this organization primarily defined by*: This is a required field. Grantee must select one of the options – *County, Zip Code*
7. *Enter the names of all of the counties covered by this organization's service area (Select all that apply)*: This field will be unlocked and required if the grantee has selected *County* in *Service area for this organization primarily defined by*. Grantee must click on **Add/Edit Counties** to open a modal window to select the counties in the grantee's service area.

Note: *Add/Edit Counties* will be displayed if the grantee has selected *County* in ***Service area for this organization primarily defined by***.

8. *Enter all of the zip codes covered by this organization's service area (Select all that apply)*: This field will be unlocked and required if the grantee has selected *Zip Code* in *Service area for this organization primarily defined by*. Grantee must click on **Add/Edit Zip Codes** to open a modal window to select the zip codes in the grantee's service area.

Note: *Add/Edit Zip Codes* will be displayed if the grantee has selected *Zip Code* in ***Service area for this organization primarily defined by***.

9. *Please check all services provided*: This is a required field. Grantee must check all the services from the available options that are provided across its service area.

Figure 38: Section 1: Grantee Primary Organization Information

Healthy Start Site

▶ DG0001 Due In: 62 Days | Status: Not Started

▶ Resources [↗](#)

Section 1: Grantee Primary Organization Information

<p>★ Street Address</p>	<p>ⓘ Provide a response for this field</p> <input type="text"/>
<p>★ City</p>	<p>ⓘ Provide a response for this field.</p> <input type="text"/>
<p>★ State</p>	<p>ⓘ Provide a response for this field.</p> <p>Select one ▼</p>
<p>★ Zip Code</p>	<p>ⓘ Enter a 5 digit Zip Code.</p> <input type="text"/>
<p>★ Select the state(s) in this organization's service area <i>(Select all that apply)</i></p>	<p>ⓘ Provide a response for this field.</p> <p>Selected (0) ▼</p>
<p>★ Service area for this organization primarily defined by:</p>	<p><input checked="" type="radio"/> County <input type="radio"/> Zip Code</p>
<p>Enter the names of all of the counties covered by this organization's service area: <i>(Select all that apply)</i></p>	<p>ⓘ Provide a response for this field.</p> <input type="text"/> Add/Edit Counties
<p>Enter all of the ZIP codes covered by this organization's service area: <i>(Select all that apply)</i></p>	<input type="text"/>

★ Please check all services provided:

- Adolescent Population
- Breastfeeding Support
- Case Management/ Care Coordination
- Children/Youth w/Special Health Care Needs
- Direct Clinical Services
- Doula Services
- Fatherhood - Case Management
- Fatherhood - Group Services/Health Education
- Food Insecurity Services
- Health Education
- Incarcerated/Justice-System Involved Population
- Interconception
- Mental & Behavioral Health (beyond screening)
- Outreach
- Preconception
- Prenatal

SECTION 2: HEALTHY START SITES

1. *Site 1: In this section, grantee must enter following information for each site.*
 - a. *Project Manager Name:* This is a required field. Grantee must enter the project manager name for the site.
 - b. *Project Name:* This is a required field. Grantee must enter the project name for the site.
 - c. *Street Address:* This is a required field. Grantee must enter the street address of the site.
 - d. *City:* This is a required field. Grantee must enter the city of the site.
 - e. *State:* This is a required field. Grantee must enter the state of the site.
 - f. *Zip Code:* This is a required field. Grantee must enter the zip code of the site.
2. *+Add Row:* Grantee must click this button to add another health start site.
3. *x Delete:* Grantee must click this to delete a site.

Figure 39: Section 2: Healthy Start Sites

The screenshot shows a web form titled "Section 2: Healthy Start Sites". It features a table with one row labeled "Site: 1" and a "Delete" button. The form fields and their validation messages are as follows:

- Project Manager Name:** Validation: "Provide a response for this field"
- Project Name:** Validation: "Provide a response for this field"
- Street Address:** Validation: "Provide a response for this field"
- City:** Validation: "Provide a response for this field."
- State:** Validation: "Provide a response for this field". The dropdown menu shows "Select one".
- Zip Code:** Validation: "Enter a 5 digit Zip Code."

At the bottom left, there is a "+ Add Row" button.

FORM-LEVEL RULES AND VALIDATIONS

1. In Section 1 field *Enter the names of all of the counties covered by this organization’s service area (Select all that apply)* will be unlocked and required if the grantee has selected *County in Service area for this organization primarily defined by.*
2. In Section 1 field *Enter all of the zip codes covered by this organization’s service area (Select all that apply)* will be unlocked and required if the grantee has selected *Zip Code in Service area for this organization primarily defined by.*

FORMER TRAINEES

FORM INSTRUCTIONS

FORMER TRAINEES DETAIL SHEET

The following information is under the **Former Trainee Detail Sheet**:

1. *Definition*
2. *Populations that are underserved or have been marginalized Definition*
3. *Gender Definitions*
4. *Ethnicity Definitions*
5. *Race Definitions*

Figure 40: Former Trainees: Detail Sheet

Former Trainees

▶ DG000i Due In: 12 Days | Status: Not Started

▶ Resources

Fields with ★ are required.

▼ Former Trainees Detail Sheet

Definition	A former trainee is defined as a trainee who completed a long-term (greater than or equal to 300 contact hours) MCH Training Program 2 years or 5 years ago, including those who received MCH funds and those who did not.
Populations that are underserved or have been marginalized Definition	Populations that are underserved or have been marginalized refer to groups of individuals at higher risk for health disparities by virtue of their race or ethnicity, socioeconomic status, geography, gender, age, disability status, or other risk factors including those associated with sex and gender. Show less
Gender Definitions	<ul style="list-style-type: none"> Male: Cisgender man, describes a person who was assigned male at birth and whose gender identity is a man/male. Female: Cisgender woman, describes a person who was assigned female at birth and whose gender identity is a woman/female. Transgender Man/Transgender Male/Transgender Masculine: Describes a person who is transgender and whose gender identity is boy/man/male. Transgender Woman/Transgender Female/Transgender Feminine: Describes a person who is transgender and whose gender identity is girl/woman/female. Other (specify): A gender identity that does not fit into the above categories, such as nonbinary (a person whose gender identity falls outside of the traditional gender binary structure of girl/woman and boy/man), agender (a person who identifies as having no gender, or who does not experience gender as a primary identity component), or another identity.

<p>Ethnicity Definitions</p>	<ul style="list-style-type: none"> • Hispanic or Latino includes all individuals of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. People who identify as Hispanic, Latino, or Spanish may be any race.
<p>Race Definitions</p>	<ul style="list-style-type: none"> • American Indian or Alaska Native includes all individuals who identify with any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. It includes people who identify as "American Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome Eskimo Community. • Asian includes all individuals who identify with one or more nationalities or ethnic groups originating in the Far East, Southeast Asia, or the Indian subcontinent. Examples of these groups include, but are not limited to, Chinese, Filipino, Asian Indian, Vietnamese, Korean, and Japanese. The category also includes groups such as Pakistani, Cambodian, Hmong, Thai, Bengali, Mien, etc. • Black or African American includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, and Somali. The category also includes groups such as Ghanaian, South African, Barbadian, Kenyan, Liberian, and Bahamian. • Native Hawaiian and Pacific Islander includes all individuals who identify with one or more nationalities or ethnic groups originating in Hawaii, Guam, Samoa, or other Pacific Islands. Examples of these groups include, but are not limited to, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, and Marshallese. The category also includes groups such as Palauan, Tahitian, Chuukese, Pohnpeian, Saipanese, Yapese, etc. • White includes all individuals who identify with one or more nationalities or ethnic groups originating in Europe, the Middle East, or North Africa. Examples of these groups include, but are not limited to, German, Irish, English, Italian, Lebanese, Egyptian, Polish, French, Iranian, Slavic, Cajun, and Chaldean.

TRAINING PROGRAM OPTIONS

In this section, the grantee will respond to the following question:

1. *Indicate if your MCHB-Funded Training Program has former trainees that completed the program 2 years and 5 years before the current reporting year. Select all that apply.*

Figure 41: Former Trainees: Training Program Options

Training Program Options

■ Provide one entry for each long-term trainee that completed their MCH Training Program 2 years ago and 5 years ago. If you indicate you have former trainee data from 5 years ago, you must also enter former trainee data from 2 years prior to the current reporting period. If you have received MCHB funding for less than two years, you are not required to provide former trainee information on this form.

Indicate if your MCHB-funded Training Program has former trainees that completed the program two years and five years prior to the current reporting year (check all that apply).

2 years prior to current reporting year

5 years prior to current reporting year

FORMER TRAINEES TRAINING PROGRAM INFORMATION

In this section, the grantee will see a table with the following column headers:

1. *Name*
2. *Training Program*
3. *Year Graduated*
4. *Degree(s) Earned with MCH Support (if applicable)*
5. *Other Degree Description (required if you selected Other)*
6. *Was university able to contact the trainee?*
7. *Status*
8. *Action*

Figure 42: Former Trainees: Former Trainees Training Program Information

Former Trainees Training Program Information

■ The status indicator represents the completion of all required fields within a former trainee record.

Total Number of Activities: 0

	Name	Training Program	Year Graduated	Degree(s) Earned with MCH Support (If applicable)	Other Degree Description (Required if you selected 'Other')	Was University able to contact the trainee?	Status	Action
<div style="border: 1px solid #0070C0; display: inline-block; padding: 2px 5px; font-size: 10px;">+ Add New</div>								

FORMER TRAINEE

The grantee may click on the + Add New button to open a new form with header, *Former Trainee*, which includes the following fields for the grantee to complete:

1. *Name (required): The grantee must provide a response.*
2. *When did the trainee complete their MCHB Training Program? (required): The grantee must select a checkbox.*
3. *Year Graduated (required): The grantee must provide four-digit year.*
4. *Gender: The grantee must select an option from the dropdown menu.*
5. *Other Gender Descriptions (required if you selected Other): The grantee may provide a response in the textbox.*
6. *Ethnicity: The grantee must select an option from the dropdown menu.*
7. *Race: The grantee must select an option from the dropdown menu.*
8. *Degree(s) Earned with MCH Support (required, if applicable): The grantee must select an option from the dropdown menu.*
9. *Other Degree Description: This is required only if you selected Other.*
10. *Was university able to contact the trainee? (required): The grantee must select an option from the dropdown menu.*
11. *Country of Residence: Select an option from the dropdown menu.*
12. *State of Residence: Select an option from the dropdown menu.*
13. *Other International Addresses Description: This is required only if you selected International Address.*
14. *City of Residence: The grantee may provide the city of residence.*
15. *Current Employment Setting: Select an option from the dropdown menu.*
16. *Other Employment Description: This is required only if you selected Other.*
17. *Work in Public Health Organization or Agency (including Title V): Select an option from the dropdown menu.*
18. *Working in the MCH: Select an option from the dropdown menu.*
19. *Working with populations that are underserved or have been marginalized (refer to the Detail Sheet for definitions): Select an option from the dropdown menu.*
20. *Met Criteria for Leadership in Performance Measure Training 10: Select an option from the dropdown menu.*

21. Met Criteria for Interdisciplinary Practice in Performance Measure Training 12: Select an option from the dropdown menu.

Figure 43: Former Trainees: Trainee Demographics

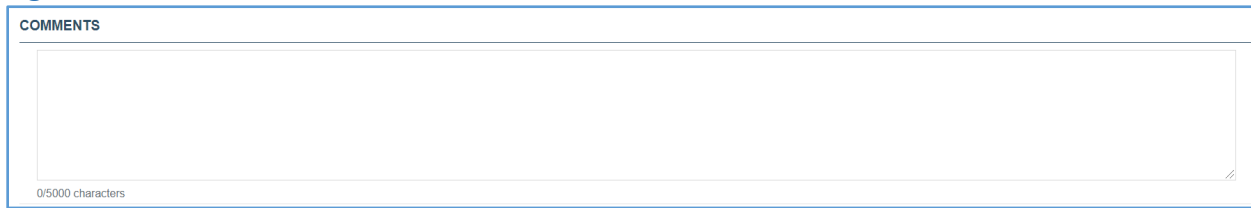
Former Trainee x	
Trainee Details	
★ Name	ⓘ Provide a response for this field <input type="text"/>
★ When did the trainee complete their MCHB Training Program?	<input type="checkbox"/> 2 years ago <input type="checkbox"/> 5 years ago
★ Year Graduated	ⓘ Provide an appropriate four digit year. <input type="text"/> YYYY
★ Gender <i>(Refer to Detail Sheet for Definitions)</i>	ⓘ Provide a response for this field Select one ▼
Other Gender Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Ethnicity <i>(Refer to Detail Sheet for Definitions)</i>	ⓘ Provide a response for this field Select one ▼
★ Race <i>(Refer to Detail Sheet for Definitions)</i>	ⓘ Provide a response for this field Select one ▼
★ Degree(s) Earned with MCH Support <i>(If applicable)</i>	ⓘ Provide a response for this field Select one ▼
Other Degree Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Was University able to contact the trainee?	ⓘ Provide a response for this field Select one ▼

Country of Residence	Select one ▼
State of Residence	Select one ▼
Other International Address Description <i>(Required if you selected 'International Address')</i>	<input type="text"/>
City of Residence	<input type="text"/>
Current Employment Setting	Select one ▼
Other Employment Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
Working in Public Health Organization or Agency(including Title V)?	Select one ▼
Working in MCH?	Select one ▼
Working with populations that are underserved or have been marginalized? <i>(Refer to Detail Sheet for Definitions)</i>	Select one ▼
Met Criteria for Leadership in Performance Measure Training 10?	Select one ▼
Met Criteria for Interdisciplinary Practice in Performance Measure Training 12?	Select one ▼

COMMENTS

The grantee may provide additional comments here.

Figure 44: Former Trainees: Comments



A screenshot of a web form element. It features a rectangular box with a blue border. At the top left of the box, the word "COMMENTS" is written in a small, dark font. The interior of the box is mostly empty, representing a text input field. In the bottom left corner of the box, the text "0/5000 characters" is displayed, indicating the current character count and the maximum allowed. A small cursor icon is visible in the bottom right corner of the text area.

FORM-LEVEL RULES AND VALIDATIONS

- 3. The Comments text box will accept both text and numerical values (maximum of 5,000 characters).*

PUBLICATIONS, CONFERENCES, AND WEB-BASED PRODUCTS (EXCEL UPLOAD OPTIONS)

FORM INSTRUCTIONS

DOWNLOAD/UPLOAD FILE(S)

The grantee may click on the *Download/Upload File(s)* icon, and it will open a new form to download/upload files.

Figure 45: Publications, Conferences, and Web-Based Products (Excel upload option): Download/Upload Files

Publications, Conference and Web-Based Products (Excel upload option)

DG0000 Due In: 2 Days | Status: Not Started

Resources

Error: Your form has (1) error(s) and cannot be submitted.

Download/Upload File(s)

Fields with ★ are required.

NOTE: The grantee may either fill the manual input form or use the Excel file option to upload the data for this form.

1. Step 1: In the Download Template section, click Download to download the Excel file.
2. Step 2: In the Upload File section, click Upload to upload the file.

NOTE: This *Products and Publications Excel Template* provides a mechanism for grantees to upload report information related to *Publications, Conferences, and Web-Based Products* directly into HRSA's Discretionary Grants Information System (DGIS) in the **Electronic Handbooks (EHBs)**.

Figure 46: Publications, Conferences and Web-Based Products: Download/Upload File(s)

Download/Upload File(s)

Step 1: Download Template

Download

Step 2: Upload File

Choose File No file chosen

Process File

Close

PUBLICATIONS AND WEB-BASED PRODUCTS

In this section, the grantee must respond to the following questions or add at least one entry on the table(s). The grantee must either indicate that they have no data to report or add at least one entry on the table(s):

1. *No Products, Publications, or Web-based Products to report on this page: The grantee may select this option.*

NOTE: For the Publications (Primary + Contributing Author) Total section, the total number of the publication with primary and contributing authors will be automatically calculated.

Figure 47: Publications, Conferences, and Web-based Products (Excel Upload Option): Publications and Web-based Products

Publications and Web-based Products	
<input checked="" type="checkbox"/> You must either indicate that you have no data to report or add at least one entry on the table(s)	
<input type="checkbox"/> No Products, Publications, or web-based products to report on this page	
	Publications (Primary + Contributing Author) Total: 0

PRIMARY AUTHOR IN PEER-REVIEWED PUBLICATIONS IN SCHOLARLY JOURNALS – PUBLISHED

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Publication*
4. *Volume*
5. *Number*
6. *Supplement*
7. *Status*
8. *Actions*

Figure 48: Publications, Conferences and Web-Based Products: Primary Author in Peer-Reviewed Publications in Scholarly Journals – Published

Primary Author In Peer-Reviewed Publications In Scholarly Journals – Published

■ Please include peer reviewed publications addressing maternal and child health that have been published by project faculty and/or staff during the reporting period. Faculty and staff include those listed in the budget form and narrative and others that your program considers to have a central and ongoing role in the project whether they are supported or not supported by the grant.

	Title	Author(s)	Publication	Volume	Number	Supplement	Status	Action
▶							✘ Not Complete	✎ Edit ✕ Delete

+ Add New

+ ADD NEW

The grantee may click on this button to open a new form with header, *Primary Author in Peer-reviewed Publications in Scholarly Journals – Published*, and see the following information:

1. *Title (required): The grantee must enter a response.*
2. *Author(s) (required): The grantee must enter a response.*
3. *Publication (required): The grantee must enter a response.*
4. *Volume (required): The grantee must enter an integer.*
5. *Number (required): The grantee must enter an integer.*
6. *Supplement (required): The grantee must enter an integer.*
7. *Year (required): The grantee must enter a four-digit year.*
8. *Page(s) (required): This is a required field, and the grantee must enter a response (e.g., 4-9, 11, 15).*
9. *Target Audience (required): The grantee must select a response from the dropdown menu.*
10. *To Obtain Copies (URL) (required): The grantee must enter a response.*
11. *Dissemination Vehicles (optional): This is not a required field, but the grantee may select a response from the dropdown menu.*
12. *Keyword (optional): This is not a required field, but the grantee may enter a response.*
13. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 49: Publications, Conferences and Web-Based Products: Primary Author in Peer-reviewed Publications in Scholarly Journals – Published

Primary author in peer-reviewed publications in scholarly journals – published	
★ Title	<p>! Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Author(s)	<p>! Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Publication	<p>! Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Volume	<p>! Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Number	<p>! Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Supplement	<p>! Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Year	<p>! Provide an appropriate four digit year.</p> <input type="text"/>

★ Page(s) <i>(e.g. 4-9,11,15)</i>	! Provide an appropriate format for page(s). <input type="text"/>
★ Target Audience	! Provide a response for this field Selected (0) ▾
★ To Obtain Copies (URL)	! Provide a response for this field <input type="text"/> 0/500 characters
Dissemination Vehicles	Selected (0) ▾
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

Cancel Save and Close

CONTRIBUTING AUTHOR IN PEER-REVIEWED PUBLICATIONS IN SCHOLARLY JOURNALS – PUBLISHED

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Publication*
4. *Volume*
5. *Number*
6. *Supplement*
7. *Status*
8. *Actions*

Figure 50: Publications, Conferences, and Web-Based Products: Contributing Author in Peer-reviewed Publications in Scholarly Journals – Published

Contributing Author In Peer-Reviewed Publications In Scholarly Journals – Published								
	Title	Author(s)	Publication	Volume	Number	Supplement	Status	Action
<input type="button" value="+ Add New"/>								

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Peer-reviewed Publications in Scholarly Journals – Published*, and see the following information:

1. *Title (required): The grantee must enter a response.*
2. *Author(s) (required): The grantee must enter a response.*
3. *Publication (required): The grantee must enter a response.*
4. *Volume (required): Provide an appropriate four-digit year.*
5. *Number (required): Enter an integer.*
6. *Supplement (required): Enter an integer.*
7. *Year (required): Provide an appropriate four-digit year.*
8. *Page(s) (required): Provide an appropriate format for pages (e.g., 4-9, 11,15).*
9. *Target Audience (required): The grantee must select a response from the dropdown menu.*
10. *To Obtain Copies (URL) (required): The grantee must enter a response.*
11. *Dissemination Vehicles: This is not a required field, but the grantee may select a response from the dropdown menu.*
12. *Keyword (optional): This is not a required field, but the grantee may enter a response.*
13. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 51: Publications, Conferences and Web-based Products: Contributing Author in Peer-reviewed Publications in Scholarly Journals – Published

Contributing author in peer-reviewed publications in scholarly journals – published	
★ Title	<p>Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Author(s)	<p>Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Publication	<p>Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>
★ Volume	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Number	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Supplement	<p>Enter an integer: 0 - 999,999</p> <input type="text"/>
★ Year	<p>Provide an appropriate four digit year.</p> <input type="text"/>
★ Page(s) <i>(e.g. 4-9,11,15)</i>	<p>Provide an appropriate format for page(s).</p> <input type="text"/>
★ Target Audience	<p>Provide a response for this field</p> <p>Selected (0) ▾</p>
★ To Obtain Copies (URL)	<p>Provide a response for this field</p> <input type="text"/> <p>0/500 characters</p>

Dissemination Vehicles	Selected (0) ▾
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters
<input type="button" value="Cancel"/>	<input type="button" value="Save and Close"/>

PEER-REVIEWED PUBLICATIONS IN SCHOLARLY JOURNALS – SUBMITTED, NOT YET PUBLISHED

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Publication*
4. *Volume*
5. *Number*
6. *Supplement*
7. *Status*
8. *Actions*

NOTE: For the Submissions Total section, the total number of the submission will be automatically calculated.

Figure 52: Publications, Conferences and Web-based Products: Peer-reviewed Publications in Scholarly Journals – Submitted, Not Yet Published

Peer-Reviewed Publications In Scholarly Journals – Submitted, Not Yet Published								Submissions Total: 1	
	Title	Author(s)	Publication	Year Submitted	Target Audience	Keywords	Status	Action	
▶							✖ Not Complete	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>
<input type="button" value="+ Add New"/>									

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Peer-reviewed Publications in Scholarly Journals – Submitted, Not Yet Published*, and see the following information:

1. *Title (required): The grantee must enter a response.*
2. *Author(s) (required): The grantee must enter a response.*
3. *Publication (required): The grantee must enter a response.*
4. *Year Submitted (required): The grantee must respond.*
5. *Target Audience (required): The grantee must select a response from the dropdown menu.*
6. *Keyword (optional): This is not a required field, but the grantee may enter a response.*
7. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 53: Publications, Conferences, and Web-based Products: Peer-reviewed Publications in Scholarly Journals – Submitted, Not Yet Published

Peer-reviewed publications in scholarly journals – submitted, not yet published

★ Title ⓘ Provide a response for this field

I

0/500 characters

★ Author(s) ⓘ Provide a response for this field

0/500 characters

★ Publication ⓘ Provide a response for this field

0/500 characters

★ Year Submitted	<p>! Provide an appropriate four digit year.</p> <input type="text"/>
★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> <p>0/500 characters</p>
Notes	<input type="text"/> <p>0/500 characters</p>

WEB-BASED PRODUCTS

The grantee will see a table with the following columns:

1. *Title*
2. *Author(s)*
3. *Publication*
4. *Volume*
5. *Number*
6. *Supplement*
7. *Status*
8. *Actions*

NOTE: For the Web-Based Products Total section, the total number of the web-based products will be automatically calculated.

Figure 54: Publications, Conferences, and Web-based Products: Web-based Products

Web-Based Products									
									Web-Based Products Total: 0
Product	Year	Type	Other Type	Target Audience	To Obtain Copies (URL or Email)	Keywords	Status	Action	
<input type="button" value="+ Add New"/>									

+ ADD NEW

The grantee may click on this button to open a new form with the header *Web-based Products* and see the following information:

1. *Product (required): The grantee must enter a response.*
2. *Year (required): The grantee must enter a four-digit year.*
3. *Type (required): The grantee must select a response from the dropdown menu.*
4. *Other Type Description: This is required if you selected Other.*
5. *Target Audience (required): The grantee must select a response from the dropdown menu.*
6. *To Obtain Copies (URL or Email) (required): The grantee must enter a response.*
7. *Keyword: This is not a required field, but the grantee may enter a response.*
8. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 55: Publications, Conferences, and Web-Based Products: Web-based Products

The screenshot shows a form titled "Web-based products" with a close button (X) in the top right corner. The form contains four main sections, each with a red star icon indicating a required field:

- Product:** A text input field with a yellow warning icon and the message "Provide a response for this field". Below the field is a character count "0/500 characters".
- Year:** A text input field with a yellow warning icon and the message "Provide an appropriate four digit year."
- Type:** A dropdown menu with a yellow warning icon and the message "Provide a response for this field". The current selection is "Selected (0)".
- Other Type Description:** A text input field with the label "Other Type Description" and a note "(Required if you selected 'Other')".

★ Target Audience

! Provide a response for this field

Selected (0) ▾

★ To Obtain Copies (URL or Email)

0/500 characters

Keywords
(No more than 5 comma separated keywords)

0/500 characters

Notes

0/500 characters

Cancel

Save and Close

CONFERENCE PRESENTATION AND POSTERS PRESENTED

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Publication*
4. *Volume*
5. *Number*
6. *Supplement*
7. *Status*
8. *Action*

NOTE: For the Conference Presentations And Posters Presented Total section, the total number of the conference presentations and posters presented will be automatically calculated.

Figure 56: Publications, Conferences, and Web-based Products: Conference Presentations and Posters Presented

Conference Presentations And Posters Presented								
								Conference Presentations And Posters Presented Total: 0
	Title	Author(s)/Organization(s)	Meeting/Conference Name	Year	Type	Target Audience	Status	Action
<div style="display: flex; align-items: center;"> + Add New </div>								

+ ADD NEW

The grantee may click on this button to open a new form with header, *Conference Presentation and Posters Presented*, and see the following information:

1. *Title (required): The grantee must enter a response.*
2. *Author(s)/Organization(s) (required): The grantee must enter a response.*
3. *Meeting/Conference Name (required): The grantee must enter a response.*
4. *Year Presented (required): The grantee must enter a four-digit year.*
5. *Type (required): The grantee must select a response from the dropdown menu.*
6. *Target Audience (required): The grantee must select a response from the dropdown menu.*
7. *To Obtain Copies (URL or Email) (required): The grantee must enter a response.*
8. *Keywords (optional): This is not a required field, but the grantee may enter a response.*
9. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 57: Publications, Conferences, and Web-based Products: Conference Presentations and Posters Presented

The screenshot shows a web form titled "Conference presentations and posters presented" with a close button (X) in the top right corner. The form contains two visible fields, both marked as required with a red star icon. The first field is labeled "Title" and has a yellow warning icon with the text "Provide a response for this field" above it. Below the text input area is a character count "0/500 characters". The second field is labeled "Author(s)/Organization(s)" and also has a yellow warning icon with the text "Provide a response for this field" above it. Below its text input area is a character count "0/500 characters".

★ Year Presented	! Provide an appropriate four digit year. <input type="text"/>
★ Type	! Provide a response for this field. Select one <input type="button" value="v"/>
★ Target Audience	! Provide a response for this field Selected (0) <input type="button" value="v"/>
★ To Obtain Copies (URL or Email)	! Provide a response for this field <input type="text"/> 0/500 characters
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

COMMENTS

The grantee may provide comments here.

Figure 58: Publications, Conferences, and Web-based Products: Comments

COMMENTS

0/5000 characters

FORM-LEVEL RULES AND VALIDATIONS

1. *The Comments text box will accept both text and numerical values (maximum of 5,000 characters).*

PRODUCTS AND SUBMISSIONS DATA (MANUAL ENTRY)

FORM INSTRUCTIONS

In this section, the grantee will see 11 clickable tabs, which are listed below:

1. *Books and Reports*
2. *Books*
3. *Book Chapters*
4. *Reports and Monographs*
5. *Products and Communications*
6. *Press Communications*
7. *Newsletters and Pamphlets*
8. *Pamphlets, Brochures, or Fact Sheets*
9. *Academics and Other*
10. *Distance Learning Modules*
11. *Other*

Further details and instructions for each of these tabs will be provided in the sections that follow.

BOOKS AND REPORTS

The grantee may click on this tab and see the following content:

1. *No Books and Reports to Add: The grantee may select this checkbox to indicate that they have no data to report or add at least one entry on the table(s).*

Figure 59: Products and Submission Data: Books and Reports

Products and Submissions Data (Manual entry)

▶ DG000 Due In: 2 Days | Status: Not Started

▶ Resources

Error: Your form has (1) error(s) and cannot be submitted.

Fields with ★ are required.

✖ Books and Reports ✖ Products and Communications ✖ Newsletters and Pamphlets ✖ Academics and Other

You must either indicate that you have no data to report or add at least one entry on the table(s)

No Books and Reports to add

BOOKS

The grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Publisher*
4. *Year Published*
5. *Target Audience*
6. *Keywords*
7. *Status*
8. *Action*

Figure 60: Products and Submission Data: Books

	Title	Author(s)	Publisher	Year Published	Target Audience	Keywords	Status	Action
--	-------	-----------	-----------	----------------	-----------------	----------	--------	--------

+ Add New

Books Total: 0

+ ADD NEW

The grantee may click on this button to open a new form with header, *Books*, and the following fields:

1. *Title (required): The grantee must enter a response.*
2. *Author(s) (required): The grantee must enter a response.*
3. *Publisher (required): The grantee must enter a response.*
4. *Year Published (required): The grantee must enter a four-digit year.*
5. *Target Audience (required): The grantee must select a response from the dropdown menu.*
6. *Keywords (optional): This is not a required field, but the grantee may enter a response.*
7. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 61: Products and Submission Data: Books fields

Books ✕

★ Title	<p>! Provide a response for this field</p> <input type="text"/>
★ Author(s)	<p>! Provide a response for this field</p> <input type="text"/>
★ Publisher	<p>! Provide a response for this field</p> <input type="text"/>
★ Year Published	<p>! Provide an appropriate four digit year.</p> <input type="text"/>

★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
Keywords <i>(No more than 5 comma seprated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

BOOK CHAPTERS

The grantee will see a table with the following column labels:

1. *Chapter Title*
2. *Chapter Author(s)*
3. *Book Title*
4. *Book Author*
5. *Publisher*
6. *Year Published*
7. *Status*
8. *Action*

Figure 62: Products and Submission Data: Book Chapters

Book Chapters

Book Chapters Total: 0

If multiple chapters are developed for the same book, list them separately.

	Chapter Title	Chapter Author(s)	BookTitle	Book Author	Publisher	Year Published	Status	Action
+ Add New								

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Book Chapters*, which contains the following fields:

1. *Title (required): The grantee must enter a response.*
2. *Author(s) (required): The grantee must enter a response.*
3. *Publisher (required): The grantee must enter a response.*
4. *Year Published (required): The grantee must enter a four digit-year.*
5. *Target Audience (required): The grantee must select a response from the dropdown menu.*
6. *Keywords (optional): This is not a required field, but the grantee may enter a response.*
7. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 63: Products and Submission Data: Book Chapters fields

Book Chapters ✕

★ Chapter Title	! Provide a response for this field <input type="text"/>
★ Chapter Author(s)	! Provide a response for this field <input type="text"/>
★ Book Title	! Provide a response for this field <input type="text"/>
★ Book Author(s)	! Provide a response for this field <input type="text"/>

★ Publisher	! Provide a response for this field <input type="text"/>
★ Year Published	! Provide an appropriate four digit year. <input type="text"/>
★ Target Audience	! Provide a response for this field Selected (0) ▾
Keywords <i>(No more than 5 comma seprated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

REPORTS AND MONOGRAPHS

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)*
3. *Year Published*
4. *Target Audience*
5. *To Obtain (URL)*
6. *Keywords*
7. *Status*
8. *Action*

Figure 64: Products and Submission Data: Reports and Monographs

Reports And Monographs								
								Reports And Monographs Total: 0
Title	Author(s)	Year Published	Target Audience	To obtain copies (URL)	Keywords	Status	Action	
<div style="display: flex; justify-content: space-between; align-items: center;"> + Add New </div>								

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Reports and Monographs*, which contains the following fields:

1. *Title (required): The grantee must enter a response.*
2. *Author(s)/Organization(s) (required): The grantee must enter a response.*
3. *Publisher (required): The grantee must enter a response.*
4. *Year Published (required): The grantee must enter a four-digit year.*
5. *Target Audience (required): The grantee must select a response from the dropdown menu.*
6. *To Obtain Copies (URL or Email): The grantee must enter a response.*
7. *Keyword(s) (optional): This is not a required field, but the grantee may enter a response.*
8. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 65: Products and Submission Data: Reports and Monographs fields

Reports and Monographs ✕

★ Title	! Provide a response for this field <input type="text"/>
★ Author(s)/Organization(s)	! Provide a response for this field <input type="text"/>
★ Year Published	! Provide an appropriate four digit year. <input type="text"/>
★ Target Audience	! Provide a response for this field Selected (0) ▾

★ To obtain copies (URL or email)	! Provide a response for this field <input type="text"/>
Keywords <i>(No more than 5 comma seprated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

COMMENTS

The grantee may provide additional comments.

Figure 66: Products and Submission Data: Comments

COMMENTS

0/5000 characters

PRODUCTS AND COMMUNICATIONS

The grantee may click on this tab and see its contents:

1. *No Products or Communications to Add: The grantee may select this checkbox to indicate that they have no data to report or add at least one entry on the table(s).*

Figure 67: Products and Submissions Data (Manual Entry): Products and Communications

Products and Submissions Data (Manual entry)

▶ DG000
Due In: 2 Days | Status: Not Started

▶ Resources

Fields with ★ are required.

✖ Books and Reports
✔ **Products and Communications**
✖ Newsletters and Pamphlets
✖ Academics and Other

! You must either indicate that you have no data to report or add at least one entry on the table(s)

No Products and Communications to add

ELECTRONIC PRODUCTS

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year*
4. *Type*
5. *Other Type(s)*
6. *Target Audience*
7. *To Obtain Copies (URL or Email)*
8. *Status*
9. *Action*

Figure 68: Products and Submission Data (Manual Entry): Electronic Products

Electronic Products

Electronic Products Total: 0

	Title	Author(s)/Organization(s)	Year	Type	Other Type(s)	Target Audience	To Obtain Copies (URL or Email)	Status	Action

+ Add New

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Electronic Products*, which includes the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization(s): This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Type: This is a required field, and the grantee must select a response from the dropdown menu.*
5. *Other Type Description (required if you selected Other): The grantee may enter a response.*
6. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
7. *To Obtain Copies (URL or email): This is a required field, and the grantee must enter a response.*
8. *Keyword(s): This is not a required field, but the grantee may enter a response.*
9. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 69: Products and Submission Data (Manual Entry): Electronic Products fields

The screenshot shows a web form titled "Electronic Products" with a close button (X) in the top right corner. The form contains four visible fields, each with a red star icon indicating it is required. Each field has a yellow warning icon and a message:

- Title:** Provide a response for this field. (Text input box)
- Author(s)/Organization(s):** Provide a response for this field. (Text input box)
- Year:** Provide an appropriate four digit year. (Text input box)
- Type:** Provide a response for this field. (Dropdown menu showing "Selected (0)" with a downward arrow)

Other Type Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▼</p>
★ To Obtain Copies (URL or Email)	<p>! Provide a response for this field</p> <input type="text"/>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

Cancel Save and Close

PRESS COMMUNICATIONS

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year*
4. *Type*
5. *Other Type(s)*
6. *Target Audience*
7. *To Obtain Copies (URL or Email)*
8. *Status*
9. *Action*

Figure 70: Products and Submission Data: Press Communications

Press Communications									
									Press Communications Total: 0
	Title	Author(s)/Organization(s)	Year	Type	Other Type(s)	Target Audience	To Obtain Copies (URL or Email)	Status	Action
<input type="button" value="+ Add New"/>									

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Press Communications*, which contains the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization(s): This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Type: This is a required field, and the grantee must select a response from the dropdown menu.*
5. *Other Type Description (required if you selected Other): The grantee may enter a response.*
6. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
7. *To obtain copies (URL or email): This is a required field, and the grantee must enter a response.*
8. *Keyword(s): This is not a required field, but the grantee may enter a response.*
9. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 71: Products and Submission Data: Press Communications fields

Press Communications ✕	
★ Title	<p>! Provide a response for this field</p> <input type="text"/>
★ Author(s)/Organization(s)	<p>! Provide a response for this field</p> <input type="text"/>
★ Year	<p>! Provide an appropriate four digit year.</p> <input type="text"/>
★ Type	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
Other Type Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
★ To Obtain Copies (URL or Email)	<p>! Provide a response for this field</p> <input type="text"/>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

Cancel Save and Close

NEWSLETTERS AND PAMPHLETS

In this section, the grantee may click on this tab to see its contents:

1. *No Newsletters and Pamphlets to Add: The grantee may select this checkbox to indicate that they have no data to report or add at least one entry on the table(s).*

Figure 72: Products and Submission Data: Newsletters and Pamphlets

NEWSLETTERS

In this section, the grantee may see a table with the following column labels:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year*
4. *Type*
5. *Target Audience*
6. *To Obtain Copies (URL or Email)*
7. *Status*
8. *Action*

Figure 73: Products and Submission Data: Newsletters

Title	Author(s)/Organization(s)	Year	Type	Target Audience	To Obtain Copies (URL or Email)	Status	Action
Newsletters Total: 0							

+ Add New

+ ADD NEW

The grantee may click on this button to open a new form with header, *Newsletters*, which contains the following fields:

3. *Title: This is a required field, and the grantee must enter a response.*
4. *Author(s)/Organization(s): This is a required field, and the grantee must enter the response.*
5. *Year: This is a required field, and the grantee must enter a four-digit year.*

6. *Type: This is a required field, and the grantee must enter a response.*
7. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
8. *To Obtain Copies (URL or Email): This is a required field, and the grantee must enter a response.*
9. *Frequency of Distribution: This is a required field, and the grantee must select a response from the dropdown menu.*
10. *Other Distribution Description (required if you selected Other): This is not a required field, but the grantee may enter a response from the dropdown menu.*
11. *Number of Subscribers: This is a required field, and the grantee may enter an integer.*
12. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*

Figure 74: Products and Submission Data: Newsletters fields

The image shows a screenshot of a web form titled "Newsletters" with a close button (X) in the top right corner. The form contains four required fields, each marked with a red star icon. Each field has a text input box and a yellow warning icon with an exclamation mark and a message:

- Title:** Provide a response for this field.
- Author(s)/Organization(s):** Provide a response for this field.
- Year:** Provide an appropriate four digit year.
- Type:** Provide a response for this field. Below the input box is a dropdown menu showing "Selected (0)".

★ Target Audience	! Provide a response for this field Selected (0) ▾
★ To Obtain Copies (URL or Email)	! Provide a response for this field <input type="text"/>
★ Frequency of distribution	! Provide a response for this field Selected (0) ▾
Other Distribution Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Number of Subscribers	! Enter an integer: 0 - 999,999 <input type="text"/>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

PAMPHLET, BROCHURE, OR FACT SHEET

In this section, the grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year*
4. *Type*
5. *Target Audience*
6. *To Obtain Copies (URL or Email)*
7. *Status*
8. *Action*

Figure 75: Products and Submission Data: Pamphlets, Brochures, or Fact Sheets

Pamphlets, Brochures Or Fact Sheets								
								Pamphlets Total: 0
	Title	Author(s)/Organization(s)	Year	Type	Target Audience	To Obtain Copies (URL or Email)	Status	Action
<input type="button" value="+ Add New"/>								

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Pamphlets, Brochures, or Fact Sheets*, which contains the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization(s): This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Type: This is a required field, and the grantee must enter a response.*
5. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
6. *To Obtain Copies (URL or Email): This is a required field, and the grantee must enter a response.*
7. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*

Figure 76: Products and Submission Data: Pamphlets, Brochures, or Fact Sheets fields

Pamphlets, brochures or fact sheets ✕

★ Title	! Provide a response for this field <input style="width: 100%; height: 25px;" type="text"/>
★ Author(s)/Organization(s)	! Provide a response for this field <input style="width: 100%; height: 25px;" type="text"/>
★ Year	! Provide an appropriate four digit year. <input style="width: 100%; height: 25px;" type="text"/>
★ Type	! Provide a response for this field <input style="width: 100%; height: 25px;" type="text" value="Selected (0)"/>

The screenshot shows a form with four main sections, each with a red star icon and a yellow warning icon that says "Provide a response for this field":

- Target Audience:** A dropdown menu currently showing "Selected (0)".
- To Obtain Copies (URL or Email):** An empty text input field.
- Keywords:** A text area with the instruction "(No more than 5 comma separated keywords)" and a character count of "0/500 characters".
- Notes:** A text area with a character count of "0/500 characters".

At the bottom of the form, there are two buttons: "Cancel" on the left and "Save and Close" on the right.

COMMENTS

The grantee may provide additional comments.

Figure 77: Products and Submission Data: Comments

The screenshot shows a text area titled "COMMENTS" with a character count of "0/5000 characters" at the bottom left.

ACADEMICS AND OTHER

The grantee may click on this tab to see its content:

1. *No Academics and Other Types to Add: The grantee may select this checkbox to indicate that they have no data to report or add at least one entry on the table(s).*

Figure 78: Products and Submission Data: Academics and Other

Products and Submissions Data (Manual entry)

▶ DG000 Due In: 2 Days | Status: Not Started

▶ Resources [↗](#)

Fields with ★ are required.

Books and Reports
 Products and Communications
 Newsletters and Pamphlets
 Academics and Other

You must either indicate that you have no data to report or add at least one entry on the table(s)
 No Academics and Other types to add

ACADEMICS COURSE DEVELOPMENT

The grantee will see a table with the following columns:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year*
4. *Target Audience*
5. *To Obtain Copies (URL or Email)*
6. *Keywords*
7. *Status*
8. *Action*

Figure 79: Products and Submission Data: Academic Course Development

Academic Course Development

Academic Course Development Total: 0

	Title	Author(s)/Organization(s)	Year	Target Audience	To Obtain Copies (URL or Email)	Keywords	Status	Action
<input type="button" value="+ Add New"/>								

+ ADD NEW

The grantee may click on this button to open a new form with header, *Academic Course Development*, and the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization(s): This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
5. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*
6. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 80: Products and Submission Data: Academic Course Development fields

The screenshot shows a web form titled "Academic Course Development" with a close button (X) in the top right corner. The form contains several required fields, each marked with a red star icon and a yellow warning icon with an exclamation mark. The fields are:

- Title**: A text input field with the instruction "Provide a response for this field".
- Author(s)/Organization(s)**: A text input field with the instruction "Provide a response for this field".
- Year**: A text input field with the instruction "Provide an appropriate four digit year.".
- Target Audience**: A dropdown menu with the instruction "Provide a response for this field" and the current selection "Selected (0)".
- To Obtain Copies (URL or Email)**: A text input field with the instruction "Provide a response for this field".
- Keywords**: A text area with the instruction "(No more than 5 comma separated keywords)" and a character count of "0/500 characters".
- Notes**: A text area with a character count of "0/500 characters".

At the bottom of the form, there are two buttons: "Cancel" on the left and "Save and Close" on the right.

DISTANCE LEARNING MODULES

The grantee may see a table with the following columns:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year Published*
4. *Media Type*
5. *Other Media Type*
6. *Target Audience*

- 7. Status
- 8. Action

Figure 81: Products and Submission Data: Distance Learning Modules

Distance Learning Modules

Distance Learning Modules Total: 0

	Title	Author(s)/Organization(s)	Year Published	Media Type	Other Media Type	Target Audience	Status	Action

+ Add New

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Distance Learning Modules*, which contains the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization(s): This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Media Type: This is a required field, and the grantee must select a response from the dropdown menu.*
5. *Other Media Description (required if you selected Other): The grantee may enter a response.*
6. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
7. *To Obtain Copies (URL or Email): This is a required field, and the grantee must enter a response.*
8. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*
9. *Notes (optional): This is not a required field, but the grantee may enter a response.*

Figure 82: Products and Submission Data: Distance Learning Modules fields

Distance Learning Modules ✕

★ Title	<p>ⓘ Provide a response for this field</p> <input type="text"/>
★ Author(s)/Organization(s)	<p>ⓘ Provide a response for this field</p> <input type="text"/>
★ Year	<p>ⓘ Provide an appropriate four digit year.</p> <input type="text"/>
★ Media Type	<p>ⓘ Provide a response for this field</p> <p>Selected (0) ▾</p>

Other Media Description <i>(Required if you selected 'Other')</i>	<input type="text"/>
★ Target Audience	<p>ⓘ Provide a response for this field</p> <p>Selected (0) ▾</p>
★ To Obtain Copies (URL or Email)	<p>ⓘ Provide a response for this field</p> <input type="text"/>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

DOCTORAL DISSERTATIONS/MASTERS' THESES

The grantee will see a table with the following column labels:

1. Title
2. Author(s)/Organization(s)
3. Year Completed:
4. Type
5. Target Audience:
6. To Obtain Copies (URL or Email)
7. Status
8. Action

Figure 83: Products and Submission Data: Doctoral Dissertations/Master's Theses

Doctoral Dissertations/Master's Theses								
								Doctoral Dissertations Total: 0
	Title	Author(s)/Organization(s)	Year Completed	Type	Target Audience	To Obtain Copies (URL or Email)	Status	Action
<input type="button" value="+ Add New"/>								

+ ADD NEW

The grantee may click on this button to open a new form with the header, *Doctoral Dissertations/Master's Theses* which contains the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author: This is a required field, and the grantee must enter a response.*
3. *Year Completed: This is a required field, and the grantee must enter a four-digit year.*
4. *Type: This is a required field, and the grantee must select a response from the dropdown menu.*
5. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
6. *To Obtain Copies (URL or Email): This is a required field, and the grantee must enter a response.*
7. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*

Figure 84: Products and Submission Data: Doctoral Dissertations/Master's Theses fields

Doctoral dissertations/Master's theses ✕

★ Title	<p>! Provide a response for this field</p> <input type="text"/>
★ Author	<p>! Provide a response for this field</p> <input type="text"/>
★ Year Completed	<p>! Provide an appropriate four digit year.</p> <input type="text"/>
★ Type	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>

★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
★ To Obtain Copies (URL or Email)	<p>! Provide a response for this field</p> <input type="text"/>
Keywords <i>(No more than 5 comma seprated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

Cancel Save and Close

OTHER

The grantee will see a table with the following column labels:

1. *Title*
2. *Author(s)/Organization(s)*
3. *Year Published*
4. *Describe Product, Publication, or Submission*
5. *Target Audience*
6. *To Obtain Copies (URL or Email)*
7. *Status*
8. *Action*

Figure 85: Products and Submission Data: Other

Other								
								Other Total: 0
■ A maximum of up to 3 other types may be entered.								
	Title	Author(s)/Organization(s)	Year Published	Describe product, publication or submission	Target Audience	To Obtain Copies (URL or Email)	Status	Action
<input type="button" value="+ Add New"/>								

The grantee may click on this button to open a new form with the header, *Other*, which contains the following fields:

1. *Title: This is a required field, and the grantee must enter a response.*
2. *Author(s)/Organization: This is a required field, and the grantee must enter a response.*
3. *Year: This is a required field, and the grantee must enter a four-digit year.*
4. *Describe Product, Publication, or Submission: This is a required field, and the grantee must enter a response.*
5. *Target Audience: This is a required field, and the grantee must select a response from the dropdown menu.*
6. *To Obtain Copies (URL or Email): This is a required field, and the grantee must enter a response.*
7. *Keywords (no more than five comma-separated keywords): This is not a required field, but the grantee may enter a response.*

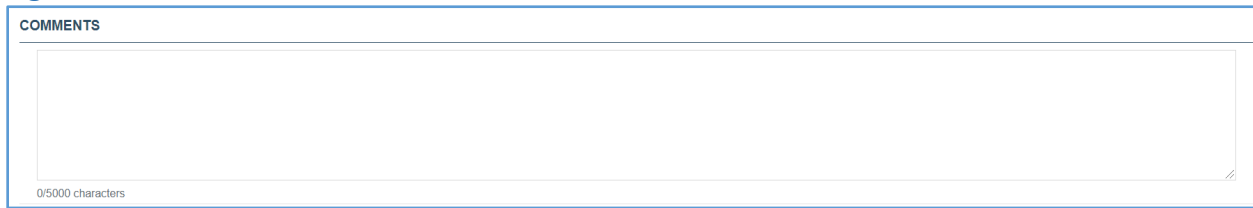
Figure 86: Products and Submission Data: Other fields

Other	
★ Title	<p>! Provide a response for this field</p> <input type="text"/>
★ Author(s)/Organization(s)	<p>! Provide a response for this field</p> <input type="text"/>
★ Year	<p>! Provide an appropriate four digit year.</p> <input type="text"/>
★ Describe product, publication or submission	<p>! Provide a response for this field</p> <input type="text"/>
★ Target Audience	<p>! Provide a response for this field</p> <p>Selected (0) ▾</p>
★ To Obtain Copies (URL or Email)	<p>! Provide a response for this field</p> <input type="text"/>
Keywords <i>(No more than 5 comma separated keywords)</i>	<input type="text"/> 0/500 characters
Notes	<input type="text"/> 0/500 characters

COMMENTS

The grantee may provide additional comments.

Figure 87: Products and Submission Data: Comments



A screenshot of a web form element. At the top left, the word "COMMENTS" is written in a small, blue, sans-serif font. Below this is a large, empty rectangular text input field with a thin blue border. In the bottom-left corner of the text box, the text "0/5000 characters" is displayed in a small, grey font. The entire form element is enclosed in a blue border.

FORM-LEVEL RULES AND VALIDATIONS

1. *The Comments text box will accept both text and numerical values (maximum of 5,000 characters).*

MCH LEAP TRAINING PROGRAM- TRAINEE INFORMATION FORM

FORM INSTRUCTIONS

MCH LEAP TRAINING PROGRAM DETAIL SHEET

The following information is under the **MCH LEAP Training Program Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. *Gender Definitions*
2. *Ethnicity Definitions*
3. *Race Definitions*

Figure 88: MCH LEAP Training Program: Detail Sheet

MCH LEAP Training Program - Trainee Information Form

▶ DG00006863: (U7EMC00021) ZASLAWSKI MCFADYEN HEALTH CARE AUTHORITY, Mathis, NY
Due In: 54 Days | Status: Not Started

▶ Resources [↗](#)

▼ MCH LEAP Training Program Detail Sheet

Gender Definitions	<ul style="list-style-type: none"> Male: Cisgender man, describes a person who was assigned male at birth and whose gender identity is a man/male. Female: Cisgender woman, describes a person who was assigned female at birth and whose gender identity is a woman/female. Transgender Man/Transgender Male/Transgender Masculine: Describes a person who is transgender and whose gender identity is boy/man/male. Transgender Woman/Transgender Female/Transgender Feminine: Describes a person who is transgender and whose gender identity is girl/woman/female. Other (specify): A gender identity that does not fit into the above categories, such as nonbinary (a person whose gender identity falls outside of the traditional gender binary structure of girl/woman and boy/man), agender (a person who identifies as having no gender, or who does not experience gender as a primary identity component), or another identity.
Ethnicity Definitions	<ul style="list-style-type: none"> Hispanic or Latino includes all individuals of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. People who identify as Hispanic, Latino, or Spanish may be any race.
Race Definitions	<ul style="list-style-type: none"> American Indian or Alaska Native includes all individuals who identify with any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. It includes people who identify as "American Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome Eskimo Community. Asian includes all individuals who identify with one or more nationalities or ethnic groups originating in the Far East, Southeast Asia, or the Indian subcontinent. Examples of these groups include, but are not limited to, Chinese, Filipino, Asian Indian, Vietnamese, Korean, and Japanese. The category also includes groups such as Pakistani, Cambodian, Hmong, Thai, Bengali, Mien, etc. Black or African American includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, and Somali. The category also includes groups such as Ghanaian, South African, Barbadian, Kenyan, Liberian, and Bahamian. Native Hawaiian and Pacific Islander includes all individuals who identify with one or more nationalities or ethnic groups originating in Hawaii, Guam, Samoa, or other Pacific Islands. Examples of these groups include, but are not limited to, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, and Marshallese. The category also includes groups such as Palauan, Tahitian, Chuukese, Pohnpeian, Saipanese, Yapese, etc. White includes all individuals who identify with one or more nationalities or ethnic groups originating in Europe, the Middle East, or North Africa. Examples of these groups include, but are not limited to, German, Irish, English, Italian, Lebanese, Egyptian, Polish, French, Iranian, Slavic, Cajun, and Chaldean.

LEAP TRAINEES PARTICIPATING IN THE LEAP TRAINING PROGRAM DURING THE 12 – MONTH REPORTING PERIOD

In this section, the grantee must respond to the following question(s):

1. *Total Number of LEAP Trainees*: Enter an integer 0 – 999,999. This is aggregate data on medium-term, and long-term LEAP trainee who are participating in the LEAP training program during the 12-month reporting period. This is a required field.

Figure 89: MCH LEAP Trainees: Leap trainees participating in the LEAP training program during the 12-month reporting period

LEAP trainees participating in the LEAP training program during the 12-month reporting period

■ Please provide aggregate data on medium-term, and long-term LEAP trainees who are participating in the LEAP training program during the 12-month reporting period. LEAP Trainees are defined as medium-term (40-299 program hours) and long-term (300+ hours) trainees enrolled in the LEAP training program.

★ Total Number of LEAP Trainees

ETHNICITY

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. *Hispanic/Latino*: Enter an integer from 0–999,999.
2. *Non-Hispanic/Latino*: Enter an integer from 0–999,999.
3. *Unrecorded*: Enter an integer from 0–999,999.
4. *Total*: This section will be automatically populated as a sum of *Hispanic/Latino and Non-Hispanic/Latino* and *Unrecorded numbers* and this value must match the *Total Number of LEAP Trainees*.

Figure 90: MCH LEAP Trainees: Ethnicity

Ethnicity

■ For Ethnicity definitions, please refer to the Detail Sheet Section.

Number of LEAP trainees who identify as:	
Hispanic/Latino	<input style="width: 100px; border: 1px solid #ccc;" type="text" value="15"/>
Non-Hispanic/Latino	<input style="width: 100px; border: 1px solid #ccc;" type="text" value="10"/>
Unrecorded	<input style="width: 100px; border: 1px solid #ccc;" type="text" value="5"/>
Total	<input style="width: 100px; border: 1px solid #ccc;" type="text" value="30"/>

RACE

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. *American Indian or Alaska Native*: Enter an integer from 0–999,999.
2. *Asian*: Enter an integer from 0–999,999.
3. *Black or African American*: Enter an integer from 0–999,999.
4. *Native Hawaiian and other Pacific Islander*: Enter an integer from 0–999,999.
5. *White*: Enter an integer from 0–999,999.
6. *More than one race*: Enter an integer from 0–999,999.
7. *Unrecorded*: Enter an integer from 0–999,999.
8. *Total*: This section will be automatically populated as a sum of *American Indian or Alaska Native*, *Asian*, *Black or African American*, *Native Hawaiian and other Pacific Islander*, *White*, *More than one race* and *Unrecorded* numbers and this value must match the *Total Number of LEAP Trainees*.

Figure 91: MCH LEAP Trainees: Race

Race	
■ For Race definitions, please refer to the Detail Sheet Section.	
Number of LEAP trainees who identify as:	
American Indian or Alaska Native	5
Asian	7
Black or African American	6
Native Hawaiian and other Pacific Islander	4
White	4
More than one race	2
Unrecorded	2
Total	30

GENDER

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. *Male: Enter an integer from 0–999,999.*
2. *Female: Enter an integer from 0–999,999.*
3. *Transgender Man: Enter an integer from 0-999,999.*
4. *Transgender Woman: Enter an integer from 0-999,999.*
5. *Other Description: Enter all other reported gender identities in comma separated list.*
6. *Other: Enter an integer from 0-999,999. This field is required if the other gender identities are entered in Other Description.*
7. *Choose not to disclose/unrecorded: Enter an integer from 0-999,999.*
8. *Total: This section will be automatically populated as a sum of Male, Female, Transgender Man, Transgender Woman, Other and Choose not to disclose/unrecorded numbers, and this value must match the Total Number of LEAP Trainees.*

Figure 92: MCH LEAP Trainees: Gender

Gender	
<div style="border: 1px solid black; padding: 2px;"> ■ For Gender definitions, please refer to the Detail Sheet Section. </div>	
Number of LEAP trainees who identify as:	
Male	5
Female	6
Transgender Man	3
Transgender Woman	4
Other Description <small>(Please enter all other reported Gender identities in comma separated list.)</small>	Test
Other	4
Choose not to disclose/Unrecorded	8
Total	30

AGE

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. 15-19: Enter an integer from 0–999,999.
2. 20-24: Enter an integer from 0–999,999.
3. 25-29: Enter an integer from 0–999,999.
4. 30-34: Enter an integer from 0–999,999.
5. 35 and older: Enter an integer from 0–999,999.
6. Total: This section will be automatically populated, and this value must match the Total Number

Figure 93: MCH LEAP Trainees: Age

Age	
Age of LEAP Trainees	
15-19	3
20-24	5
25-29	7
30-34	4
35 and older	11
Total	30

NUMBER OF LEAP TRAINEES WHO ARE ENROLLED IN COLLEGE NUMBER OF LEAP TRAINEES WHO ARE ENROLLED IN COLLEGE

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. *Part-time*: Enter an integer from 0–999,999.
2. *Full-time*: Enter an integer from 0–999,999.
3. *Unrecorded*: Enter an integer from 0–999,999.
4. *Total*: This section will be automatically populated as a sum of *Part-time* and *Full-time* and *Unrecorded* numbers and this value must match the *Total Number of LEAP Trainees*.

Figure 94: Number of LEAP trainees who are enrolled in college

Number of LEAP trainees who are enrolled in college:	
Part-time	14
Full-time	13
Unrecorded	3
Total	30

NUMBER OF LEAP TRAINEES WHO:

In this section, the grantee may respond to following question(s). This section will be required if a non-zero value is entered in *Total Number of LEAP Trainees*.

1. *Are the first in their family to attend college*: Enter an integer from 0–999,999.
2. *Work full-time (>35 hours/week) while enrolled in college*: Enter an integer from 0–999,999.
3. *Work full-time (>35 hours/week) while enrolled in college*: Enter an integer from 0–999,999.

Note: Each field can have value less than or equal to *Total Number of LEAP Trainees*.

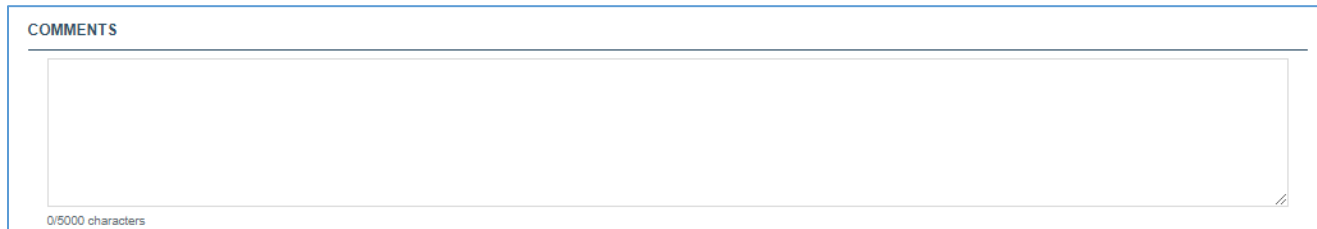
Figure 95: Number of LEAP trainees who

Number of LEAP trainees who:	
Are the first in their family to attend college <i>(First-generation college students are students who enrolled in postsecondary education and whose parents do not have any postsecondary education experience.)</i>	30
Work full-time (>35 hours/week) while enrolled in college <i>(Includes LEAP trainees who have worked full-time (>35 hours/week) at any point during the 12-month reporting period)</i>	25
Have a dependent(s) other than spouse	4

COMMENTS

The grantee may provide additional comments here.

Figure 96: MCH LEAP Trainees: Comments



COMMENTS

0/5000 characters

FORM-LEVEL RULES AND VALIDATIONS

1. For **New Competing Performance Reports (NCPRs)**, this form will be available in view only mode with all fields blank and greyed out. Grantee must click on “Save and Continue” button on this form before submitting the report.
2. *Ethnicity, Race, Gender, Age, Number of LEAP trainees who are enrolled in college, Number of LEAP trainees who* sections will be unlocked when a non-zero values is entered in the *Total Number of LEAP Trainees*.
3. The *Comments* text box will accept both text and numerical values (maximum of 5,000 characters).