



The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Office of K-16 Initiatives and Access Programs
Pre-Collegiate Preparation Programs Unit
Albany, New York 12234

**Liberty Partnerships Program (LPP)
2010 – 2011 Interim Report
Due Friday May 6, 2011, 12noon**

Name of institution: _____

Date report submitted: _____

Name of LPP project: _____

Project number: _____

Mailing address:

Contracted # of students to be served: _____

Actual # of students enrolled: _____

Name of LPP Administrative Officer: _____

E-mail address: _____

Fax number: _____

Telephone number (include area
code & extension): _____

Names and Signatures

Director/Administrative Officer Date

Chief Executive Officer Date

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Please submit an electronic copy via email to ktorner@mail.nysed.gov and post mail an original signed hard copy

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LPP INTERIM REPORT
September 1, 2010 –
February 28, 2011

Institution Name:

TABLE 1: ROSTER OF SCHOOLS ATTENDED BY LPP STUDENTS

List all Schools in your LPP. Insert additional rows if necessary.

*MOA = Memorandum of Agreement NOTE: A partnership school is one which has signed a memorandum of agreement with your institution's LPP. A non-partnership school is one that is attended by students served by your LPP, but for which there is no MOA. ** SIIS - schools in improvement status; PLAS - persistently lowest achieving schools, SURR-schools under registration review, GS - School in good standing.

Line No.	Name and Address of School or GED Program	*Signed MOA		**Accountability Designation: SIIS, PLAS & SURR
		Yes	No	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
14				
15				

16				
17				
18				
19				
20				

TABLE 2: ROSTER OF PARTICIPATING ORGANIZATIONS

List all Partner organizations providing services to students in your LPP. Insert additional rows if necessary.

* Partner Organization Code: (1) Local government agency; (2) College/university; (3) Community based organization; (4) Business; (5) Professional organizations and associations; (6) Other. ** MOA = Memorandum of Agreement NOTE: A partnership organization is one which has signed a memorandum of agreement with your Institution's LPP

Line No.	Name and Address of Partner Organization	* Organization Code	**Signed MOA		Brief Description of Services Provided
			Yes	No	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

15

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