

Final Report of IOTI Project Accomplishments rev. June 2010

USU Purchase Order #:	Name of Project:	Administering Agency:
Principal Investigator:		Reporting Period: From _____ To _____
100-word summary of project training activities and accomplishments for the year:		

Describe efforts you made this year to acquire funding to continue these training efforts. Categorize these efforts as indicated below. If this specific training will not continue, please indicate "NA".

- **Legislative/Policy-**
- **Grant applications-**
- **Meetings/collaborative discussions-**
- **Other-**

Training Events

List only events where actual delivery of training has occurred. DO NOT include planning or other organizational meetings as training events. Training delivered to multiple-sites (i.e., utilizing distance education), should be reflected as a single training event with site locations listed. (Use additional pages if necessary.)

Date	Location	Length of Time	# of Trainees	Topic	Instructor(s)	Outcomes

INFORMATION ON TRAINEES

Please enter a cumulative total of training participants for the year, counting each individual only once.
Use the most appropriate category for “type of participants” and for “occupation.”

TYPE OF PARTICIPANT				OCCUPATION	
# Consumers or Parents of Individuals with a Disability	# Paraprofessionals	# Professionals	# Other (please describe)	# Currently Employed in Disability Services	Type of Agencies Where Employed

Are there training aspects or outcomes you regard as particularly significant and would like to highlight? Please list below:

Do you have materials (curricula, videos, booklets, etc.) either in print or electronic format that are available to share? How can they be accessed?

Will there be ongoing training based on your IOTI work? If so, how can this be accessed?

Please include summary data on outcomes as presented and approved in the evaluation plan of your proposal along with a copy of the evaluation form.