Program Name: _____ Grant #: _____ Reviewer Initials: _____
Date: _____

# AMERICORPS PROGRAM PERFORMANCE DATA REVIEW FORM

**Program Name:**_____
**Staff Member Name(s):** _____
**Grant #:**_____
**Program Year:**_____ **# Slots:** _____ **# MSYs:** _____

**PERFORMANCE MEASURE REVIEWED** (write in):
Performance Measure #:_____

|  | Comp. | Non-Comp. | COMMENTS / Notes |
|---|---|---|---|
| **PERFORMANCE MANAGEMENT** | | | |
| **Performance Data Available**<br>*Data on the programs performance and progress is reported, and available to the reviewer.* | ☐ | ☐ | |
| **Data Collection Instrument**<br>*Instrument used to collect data follows guidance from CNCS. Instrument is available to reviewer.* | ☐ | ☐ | |
| **Data Calculation**<br>*Data is calculated following guidance from CNCS. Program can demonstrate how data is calculated* | ☐ | ☐ | |
| **Data Accuracy**<br>*Performance is reported using accurate data.* | ☐ | ☐ | |
| **Supporting Documentation**<br>*Program maintains supporting documentation for all members.* | ☐ | ☐ | |

**PERFORMANCE MEASURE DATA TEST**
*Reviewer tests data at the program level for alignment with individual member reports.*

# reported on PM in last progress report: _____
# of members reporting on measure in last progress report: _____

Names of all members reporting on measure in the reporting period with # reported
 *ie:* "John Smith (5)":

_____

_____
_____
_____
_____

**INDICATOR: Individual member reports add up to the cumulative number reported**

\# Program reported: _____

\# Individual members reported cumulatively: _____

*Numbers must match for compliance*

☐ Compliant ☐ Non-compliant

## PERFORMANCE MEASURE MEMBER DATA TEST

*Reviewer reviews data at the member level for performance measure accuracy and supporting documentation*

Member One Name: _____

\# reported on measure in last report: _____

\# supported with backup documentation: _____

*Numbers must match for compliance*

☐ Compliant ☐ Non-compliant

Member Two Name: _____

\# reported on measure in last report: _____

\# supported with backup documentation: _____

*Numbers must match for compliance*

☐ Compliant ☐ Non-compliant

Numbers reported in program report are supported with documentation at member level.

*As required in performance measure instructions*

☐ Compliant ☐ Non-compliant

Supporting documentation is available to reviewer.

*As required in performance measure instructions*

☐ Compliant ☐ Non-compliant

## COMMENTS:

_____

_____

_____

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_____