

Consortium Name: **Mille Lacs Band of Ojibwe ABE**

Table A (May 1, 2022 - April 30, 2023)

Total Enrollment & Contact Hours

Enter the number of enrollees and their total contact hours.

Educational Functioning Level at Entry A	Number of Enrollees (any # of hrs) B	Total Contact Hours For Enrollees C
1. ABE 1	4	39.1
2. ABE 2	13	248.4
3. ABE 3	23	378.9
4. ABE 4	45	1155.4
5. ABE 5	7	158.6
6. ABE 6	1	3.0
7. ESL 1	0	0.0
8. ESL 2	0	0.0
9. ESL 3	0	0.0
10. ESL 4	0	0.0
11. ESL 5	0	0.0
12. ESL 6	0	0.0
Subtotal	93.0	1983.39
13. No Level Assigned (not tested)	123.0	348.3
14. Conditional Work Referral	63.0	475.0
15. Official HSE (GED and HiSET) Testing Hours		5 (don't count)
Subtotal	186.0	823.3
GRAND TOTAL	279.0	2806.6
16. Low-Incidence Disability	n/a	n/a

NOTES: The grand total number of contact hours reported in Column C will determine the grantee's contact hours for **state** Adult Basic Education aid.

The subtotal of lines 1 - 12 on Column C, will determine the grantee's contact hours for **federal** aid.

Low-Incidence Disability enrollees and hours should be entered only for students whose status has been approved through the PANDA/MDE process.

End of Worksheet

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Table 7 (July 1, 2022 - June 30, 2023)

Adult Education Personnel by Function and Job Status

Enter all personnel by function and job status.

Function (A)	Adult Education	Personnel	NA
	Total Number of Part-time Personnel (B)	Total Number of Full- time Personnel (C)	Unpaid Volunteers (D)
State-level Administrative/ Supervisory/Ancillary Services			
<i>Please Note: for Admin, Counselor, and Para count POSITIONS not head count</i>			
Local-level Administrative/ Supervisory/Ancillary Services*		1	0
Local Counselors*	0	0	0
Local Paraprofessionals*	0	0	0
<i>Please Note the Teacher count is a cumulative HEAD COUNT</i>			
Local Teachers**	1	5	0
Teachers' Years of Experience in Adult Education			
Less than one year	0	1	
One to three years	0	1	
More than three years	1	3	
Teacher Certification			
No certification	0	1	
Adult Education Certification	0	1	
K-12 Certification	1	3	

Special Education Certification	0	0	
TESOL Certification	0	0	

* For reporting State-level Administrative/Supervisory/Ancillary Services and Local-level Administrative/Supervisory/Ancillary Services, Counselors, and Paraprofessionals:

- Enter an unduplicated count of personnel by function and job status. Count the number of positions, not the number of staff who filled them.
- In Column B, count one time only each part-time position of the program administered under AEFLA who is being paid out of Federal, State, and/or local education funds.
- In Column C, count one time only each full-time position of the program administered under AEFLA who is being paid out of Federal, State, and/or local education funds.
- In Column D, report the number of volunteer positions (personnel who are not paid) who served in the program administered under AEFLA.

** For reporting Local Teachers:

- Count and report the number of teachers, not the number of positions. For example, if one local part-time teaching position was filled with 3 teachers throughout program year, count and report 3 local part-time teachers.
- Report adult education experience and certification for paid teachers only, not volunteers. The total number of teachers for which experience is reported must equal the total number of teachers reported in Columns B and C.
- For certification, report all certifications a teacher has. Multiple responses are allowed. Report teachers who lack certification in the "No Certification" category.

End of Worksheet

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Table B (Program year 2023-2024)				
Consortium Providers, Sites and Other Members				
Enter all consortium member organizations/districts that are ABE PROVIDERS* and the regular programming sites they staff and operate. Indicate which sites are NON-				
District/Organization Name	District Number (if applicable)	Programming Site	Programming Site Address	Site is NON-PUBLIC (e.g. correctional facility)
Mille Lacs Band of Ojibwe Aanjibimaadizing	n/a	DI Training Center	43500 Migizi Drive, Onamia, MN 56359-2236	
Mille Lacs Band of Ojibwe Aanjibimaadizing	n/a	DI Office	201 W Hwy 210 Suite 100, McGregor, MN 55760	
Mille Lacs Band of Ojibwe Aanjibimaadizing	n/a	DI/ Azhoomog	45749 Grace Lake Road, Sandstone, MN 55072	
Mille Lacs Band of Ojibwe Aanjibimaadizing	n/a	DI/ Evergreen	2481 Evergreen Court, Suite A, Hinckley, MN 55037	
Mille Lacs Band of Ojibwe Aanjibimaadizing	n/a	Urban	1404 E Franklin Avenue, Minneapolis, MN 55404	
<i>(insert more lines if necessary)</i>				
Total Number of Providers	5			
Enter all other member organizations/districts that are not ABE PROVIDERS*.				
<i>(insert more lines if necessary)</i>				

NOTE: list any sites anticipated to have ABE programming within the 23-24 program year (July 2023 - June 2024).
 * ABE PROVIDERS are districts, CBOs or other entities that use ABE funds to hire at least one ABE instructor.
 ** NON-PUBLIC SITES are places where ABE services are delivered only to a specific group of people, such as employees of that company or people incarcerated at that facility.

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Table 14 (July 1, 2022 - June 30, 2023)

Local Providers by Funding Source

Enter the type of fiscal agent entity, number of each type of additional provider receiving state and federal ABE funds, number of each type of IELCE grantee, and the amount of state and federal (including IELCE) ABE

Provider Agency (A)	Fiscal Agency Entity (B)	Number of Additional Providers (C)	Number of IELCE Grantees (D)	Federal Funding (including IELCE) Amount (E)	% of Total (F)	State Funding Amount (G)	% of total (H)
Local Education Agencies (school districts)	1	0	1	None	100.00%	None	100.00%
Public or Private Nonprofit Agencies							
Community-based Organizations					0.00%		0.00%
Faith-based Organizations					0.00%		0.00%
Libraries					0.00%		0.00%
Institutions of Higher Education							
Community or Technical Colleges					0.00%		0.00%
Four-year Colleges or Universities					0.00%		0.00%
Other Institutions of Higher Education					0.00%		0.00%
Other Agencies							
Correctional Institutions					0.00%		0.00%
Other Institutions (non-correctional)					0.00%		0.00%
All other Agencies					0.00%		0.00%
Totals	1	0	1	\$ -	100.00%	\$ -	100.00%

Provider Total for Consortium 1

In Column B report the type of entity that is the fiscal agent of the consortium. The total in cell B20 must be ONE.

In Column C report the number of each type of provider receiving state and/or federal ABE funds downstream from the fiscal agent entity.

In Column D report the number of each type of grantee receiving IELCE funds

In Columns E and G report the amount of federal and state funding providers received. Columns F and H will calculate automatically

NOTE: Consortium Total Providers in cell B22 should match with number of providers listed on Table B.

NOTE: Total amount in cell F20 MUST match total federal award amounts from award letter for fiscal year 22-23, plus award amounts for IELCE grants, if applicable.

NOTE: Total amount in cells H20 MUST match total state award amounts from award letter for fiscal year 22-23.

End of Worksheet