



## FIRST PERFORMANCE PROGRESS REPORT 2010

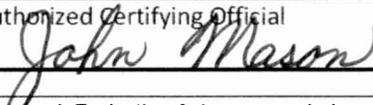
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|---|---|
| 1. Recipient Organization ( <i>Name and complete address including zip code</i> )<br><b>Auburn University, Auburn, Alabama, 36849</b>   | 2. Award Identification Number<br><b>01-42-B10580</b> |
| 3. Performance Narrative (Q1)<br>No federal grant funds were expended in the first quarter. We have met with our partners to clarify roles and responsibilities and with University administration to review budget and arrange for protocols regarding proper use of fiscal transactions for BTOP grant funds. We also developed a comprehensive project plan and a manual for PCCs. Items included in these documents are:<br><br>Project Scope<br>Goals and Objectives<br>What the BTOP grant covers for PCCs<br>Project Approach<br>Major Deliverables<br>Roles and Responsibilities of Project Partners<br>Key Personnel Job Descriptions<br>Budget Summary<br>Budget Concerns<br>Updated List of PCC Locations and Contacts<br>Expectations for PCCs<br>Description Training Opportunities<br>Next Steps<br>GANTT Chart |   |

4. Performance Projections (Q2)

In the second quarter, approximately \$120,000 will be expended to work on the following:

- 1      Verify library participation**  
Develop a Letter  
Mail Letter  
Follow-up Phone Calls
  
- 2      Finalize MOUs**  
Draft MOU Template  
Customize MOU for Each PCC  
Mail MOU  
Revise MOU  
Collect Signed MOUs
- 3      Conduct technology assessment survey**  
Design survey  
Distribute survey  
Follow-up with phone calls / e-mails  
Enter data  
Analyze results
  
- 4      Train PCCs on use of in-kind form**
  
- 5      Notify Partners**  
Verify partners' participation  
Identify additional partners  
Inform partners of reporting requirements  
Finalize contracts
  
- 6      Recruit, Hire, and Train Staff**  
Training supervisor  
Tech installers  
Graduate assistants  
Student interns
  
- 7      Develop training curriculum**
  
- 8      Design training materials**
  
- 9      Schedule regional training dates**
  
- 10     Design distance education modules**
  
- 11     Develop marketing plan**
  
- 12     Develop outcomes measurement tools**

5. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.

|   |   |
|---|---|
| 5a. Typed or Printed Name and Title of Authorized Certifying Official             | 5c. Telephone (area code, number and extension) |
| John M. Mason   | 334-844-4430                                    |
|   | 5d. Email Address                               |
|   | taylomm@auburn.edu                              |
| 5b. Signature of Authorized Certifying Official                                   | 5e. Date Report Submitted (Month, Day, Year)    |
|  | 11/04/2010                                      |

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