

OST Education Grants - Year 1 Annual Report

Program Information

* 1. Name of Organization

* 2. Primary Contact

Name

Email

Phone

* 3. Award Amount

* 4. Name of grant-funded program/project

* 5. Was this grant for a new program/course?

☐ Yes

☐ No

☐ Other (please specify)

* 6. Enrollment & Impact Program Data (for students participating in the program)

Number of elementary
school students
currently enrolled in
program/project:

Number of middle
school students
currently enrolled in
program/project:

Number of high school
students currently
enrolled in
program/project:

List the regions served
by the program/project
(Western MA/ Central
MA / North East/
South East/
MetroWest/ Greater
Boston):

Number of students
participating in other
out-of-school time
STEM related
activities (after school,
weekend, summer):

Please list other out-of-
school time STEM
programs attended:

Number of students
participating in STEM
apprenticeships/intern
ships:

(For high school
seniors only) Number
of students entering
college majoring in
STEM:

(For high school
seniors only) Percent
of total seniors
entering college
majoring in STEM:

(For all participating
grades) Number of
students PLANNING
TO enter college
majoring in STEM:

(For high school
seniors only) Percent
of total seniors
PLANNING TO enter
college majoring in
STEM:

(For all other
participating grades)
Percent of students
PLANNING TO enter
college majoring in
STEM:

(For high school
seniors only) Number
of students entering
post-graduation
training programs in
STEM:

(For high school
seniors only) Percent
of total seniors
entering post-
graduation training
programs in STEM:

(For all participating grades) Number of students PLANNING TO enter post-graduation training programs in STEM:

(For high school seniors only) Percent of total seniors PLANNING TO enter post-graduation training programs in STEM:

(For all other participating grades) Percent of total students PLANNING TO enter post-graduation training programs in STEM:

(For high school seniors only) Number of students entering life sciences workforce post-graduation:

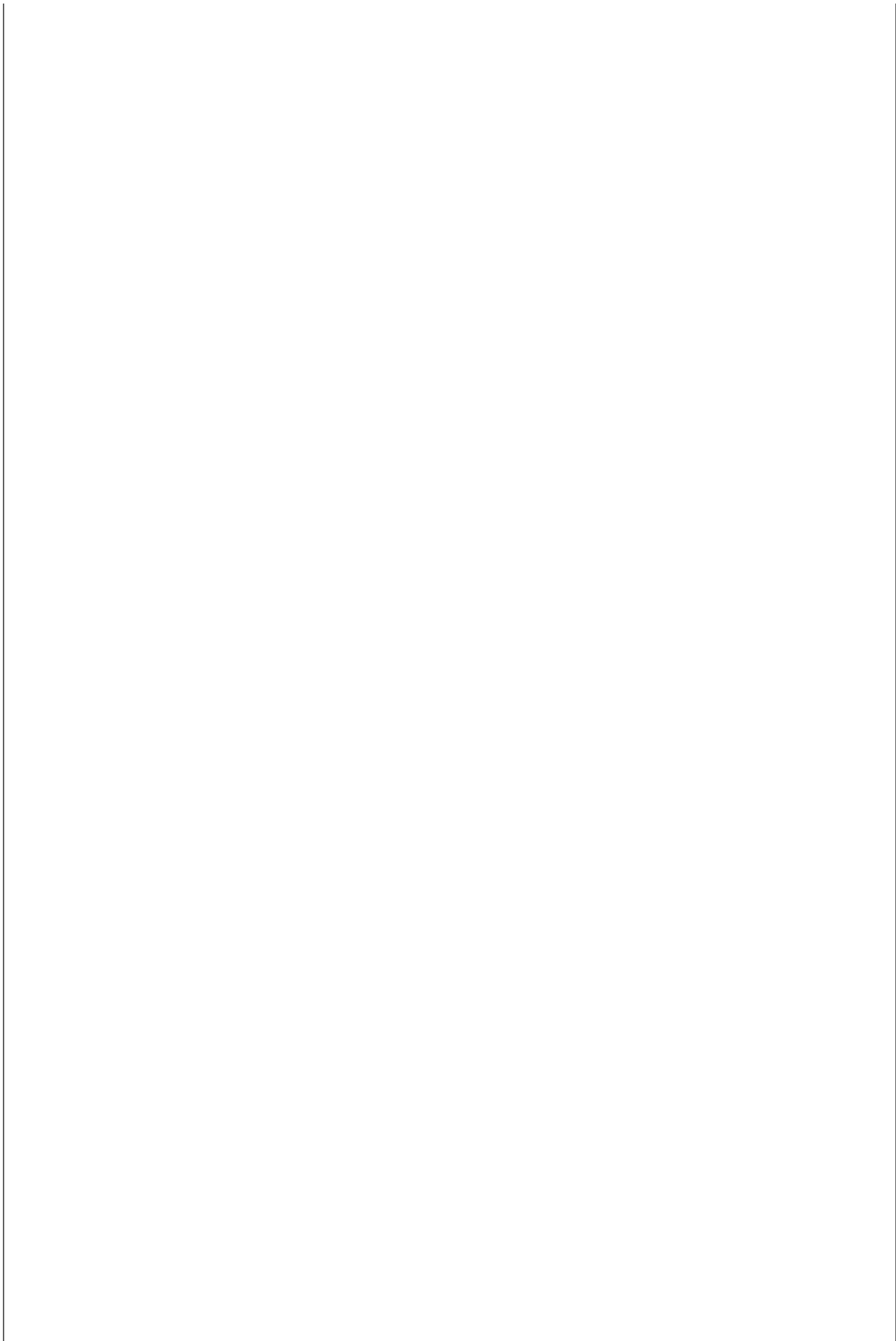
(For high school seniors only) Percent of total seniors entering life sciences workforce post-graduation:

(For all participating grades) Number of students PLANNING TO enter life sciences workforce post-graduation:

(For high school seniors only) Percent of total seniors PLANNING TO enter life sciences workforce post-graduation:

(For all other participating grades) Percent of total students PLANNING TO enter life sciences workforce post-graduation:

7. Please use this space to write additional comments or expand upon responses from the previous question, as needed.



Grant Impact

* 8. Do you have any partnerships with local school districts?

☐ Yes

☐ No

☐ Other (please specify)

9. If yes, list your school partners.

10. If yes, how has your program supported school-based life sciences curriculum?

* 11. How have MLSC grant funds impacted the capacity, effectiveness, and quality of instruction and opportunities for career awareness provided by your program? (Select all that apply.)

☐ Expanded program and/or course offerings.

☐ Acquisition of advanced equipment and technology for improved training and delivery.

☐ Hired additional qualified instructors to cater to growing demand.

☐ Implemented updated curriculum aligned with industry standards.

☐ Industry engagement for enhanced skills training.

☐ Increased internships within the life sciences industry.

☐ Enhanced student career awareness and exposure.

☐ Increased student performance, engagement, and interest in life sciences.

☐ Provided hands-on activities and experiences to maximize student engagement and interest.

☐ Enhanced student support services.

☐ Other (please specify)

* 12. As a result of the grant funding, what types of training, workshops, or certifications were offered to students? (Select all that apply.)

- ☐ Soft skills development
- ☐ Technical and hands-on skills training
- ☐ Career Awareness
- ☐ Career fairs/Networking events
- ☐ Industry-specific certifications
- ☐ Other (please specify)

13. Specify what types of technical training and/or hands-on activities were provided in your program.

* 14. What metrics were used to measure the success and impact of the workforce development program? (Select all that apply.)

- ☐ Continuing education in STEM fields.
- ☐ Evaluation of student skills and knowledge.
- ☐ Evaluation of student soft skills development.
- ☐ Student satisfaction with the program.
- ☐ Student awareness and understanding of life sciences careers.
- ☐ Other (please specify)

* 15. How did you evaluate the metrics indicated in the previous question?

Continuing education in STEM fields:

Evaluation of student skills and knowledge:

Evaluation of student soft skills development:

Student awareness and understanding of life sciences careers:

Student satisfaction with the program:

Other:

* 16. For each of the metrics you evaluated, what were the outcomes of these evaluations?

* 17. Which specific areas have seen the most significant positive impact from the grant funds? (Select all that apply.)

- ☐ Expansion of program offerings to meet industry demands.
- ☐ Increased enrollment and interest in programs.
- ☐ Upgrading and modernizing existing training facilities.
- ☐ Developing new partnerships with employers and industries.
- ☐ Positive feedback from participants about life sciences knowledge and skills.
- ☐ Other (please specify)

18. Provide additional comments for the previous question if needed:

* 19. What role have industry partners served thus far? (Select all that apply.)

- ☐ Provided skills training.
- ☐ Hosted interns.
- ☐ Consulted on high-demand skills for curriculum/program enhancement.
- ☐ Supported with instrument set-up/operation.
- ☐ Participated in guest lectures.
- ☐ Provided student mentoring.
- ☐ Other (please specify)

20. Provide additional comments for the previous question if needed: