# **Year 5 GEER Annual Report Template**

California Department of Education

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## **Instructions**

This document contains the California Department of Education (CDE) Year 5 Governor’s Emergency Education Relief (GEER) Annual Report template. The data collected is required as a condition of using the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act GEER II funds.

The Year 5 GEER Annual Report is applicable to activities and expenditures that occurred **July 1, 2023 – June 30, 2024**.

This template is an optional tool to support Annual Report preparation. This template should **not** be submitted in lieu of the report. The GEER Annual Report must be submitted through the CDE Stimulus Funding Reporting Portal at <https://www3.cde.ca.gov/caresactreporting/> during the reporting window. The CDE Federal Stimulus Annual Reporting Help Page can be found at <https://cde.ca.gov/fg/cr/anreporthelp.asp>.

*All bracketed text indicates submission fields.*

## **Acronyms**

Expanded Learning Opportunities Grant (ELO-G); local educational agency (LEA)

## **YEAR 4 GEER II Annual Report Template**

*Note: This collection is required from all LEAs that have received GEER II, Resource Code 3217, funds that did not report funds fully expended in prior annual reporting periods*.

Help Page – GEER II Fund Annual Reporting: [https://www.cde.ca.gov/fg/cr/anreporthelp.asp#geerii](https://www.cde.ca.gov/fg/cr/anreporthelp.asp%23geerii)

### **Fund Overview**

Which students and staff were served with these funds? **(Select one)**

* Students and staff in both Title I and Non-Title I Schools [Select Students and staff in both Title I and Non-Title I Schools, if applicable]
* Only students and staff in Title I Schools [Select Only students and staff in Title I Schools, if applicable]

### **Amounts Expended**

Please use the following guidelines to report funds expended:

* Please report totals in whole numbers without decimals, commas, or other punctuation.
* The Current Reporting period is between July 1, 2023, and June 30, 2024.
* Please report any additionally expended amount from March 13, 2020, to June 30, 2023, that was not reported on previous GEER II Annual Reports. You may review your previous GEER II Annual report in the Stimulus Funding Reporting Portal.

Total Awarded Amount: <auto-populated by CDE>

Previously Reported Expenditures from previous GEER II Annual Reports:   
<auto-populated by CDE>

Current Amount Expended by the LEA (include expenditures for July 1, 2023, to June 30, 2024, AND any amount for March 13, 2020, to June 30, 2023, not reported during the previous GEER II Annual Reports): [Enter dollar ($) amount expended]

Number of Public Schools Served with GEER II Funds: [Enter Number of Public Schools Served with GEER II funds]

Number of Non-Public Schools Served with GEER II Funds: [Enter Number of Non-Public Schools Served with GEER II funds]

### **Uses of GEER II Funds**

Please use the following guidelines to report funds expended:

* Answer each of the following questions about the use of GEER II Funds.
* The response to certain questions will trigger required follow up.
* The Current Reporting period is between July 1, 2023, and June 30, 2024.

1. Purchasing educational technology (including hardware, software, and connectivity), which may include assistive technology or adaptive equipment: [Yes/No]

*Note: Question A below is only visible if “Yes” is selected for question 1 above.*

* 1. Did this LEA use GEER II funds to provide home Internet access for any students? [Yes/No]

*Note: Questions a–e below are only visible if “Yes” is selected for question A above.*

1. Mobile hotspots with paid data plans: [Yes/No]
2. Internet connected devices with paid data plans: [Yes/No]
3. District pays for the cost of home Internet subscription for student: [Yes/No]
4. District provides home Internet access through a district-managed wireless network: [Yes/No]
5. Other: [Yes/No]

*Note: Question 1 below is only visible if “Yes” is selected for question e above.*

* + - 1. Please describe: [Enter description of Other]

1. Activities focused specifically on addressing the unique needs of low-income children or students, children with disabilities, English learners, racial and ethnic minorities, students experiencing homelessness, and foster care youth: [Yes/No]
2. Providing mental health services and supports: [Yes/No]
3. Sanitization and minimizing the spread of infectious diseases, including cleaning supplies and staff training to address sanitization and minimizing the spread of infectious diseases: [Yes/No]
4. Extended learning time opportunities, including tutoring, summer learning, and supplemental afterschool programs: [Yes/No]
5. Other (uses of funds not included above): [Yes/No]

*Note: Question A below is only visible if “Yes” is selected for question 6 above.*

* 1. Please specify: [Enter description of Other]

### **Planned Uses of Remaining Funds**

Please use the following guidelines to report planned uses of remaining funds in percentages:

* Report your planned uses based on the **total unexpended amount on June 30, 2024**.
* Please use whole numbers to indicate the approximate percentage of funds planned to be expended for each category.
* Please add a "0" for any category that does not include planned uses of GEER II funds as of June 30, 2024.
* The Total Percentage value of Section A must equal 100% (or 0% if the remaining funds total is 0) when you are finished.

Remaining Funds as of June 30, 2024: <auto-calculated by CDE>

#### **Section A**

1. Percent remaining funds planned for purchasing educational technology: [Enter percentage (%) of remaining funds planned for purchasing educational technology]
2. Percent remaining funds planned for providing mental health services and supports: [Enter percentage (%) of remaining funds planned for providing mental health services and supports]
3. Percent remaining funds planned for sanitization and minimizing the spread of infectious diseases, including cleaning supplies and staff training to address sanitization and minimizing the spread of infectious diseases, including cleaning supplies and staff training to address sanitization and minimizing the spread of infectious diseases: [Enter percentage (%) of remaining funds planned for sanitization and minimizing the spread of infectious diseases]
4. Percent remaining funds planned for extended learning time opportunities, including tutoring, summer learning, and supplemental afterschool programs: [Enter percentage (%) of remaining funds planned for extended learning time opportunities]
5. Percent remaining funds planned for other (uses of funds not included above):[Enter percentage (%) of remaining funds planned for other uses]
   1. Please Specify: [Enter description of Other, if a value greater than 0 is entered for question 5 above]
6. Percent remaining funds for use not yet determined:[Enter percentage (%) of remaining funds for use not yet determined]

Total Percentage: <auto-calculated by CDE>

#### **Section B**

Provide the total percent of remaining funds planned for activities focused specifically on addressing the unique needs of low-income children or students, children with disabilities, English learners, racial and ethnic minorities, students experiencing homelessness, and foster care youth.

NOTE: This should include funds planned for purposes also included in Section A above if the planned uses are focused specifically on addressing the unique needs of low-income children or students, children with disabilities, English learners, racial and ethnic minorities, students experiencing homelessness, and foster care youth.

Percent of funds planned for activities focused specifically to addressing the unique needs of low-income children or students, children with disabilities, English learners, racial and ethnic minorities, students experiencing homelessness, and foster care youth: [Enter percentage (%) of remaining funds planned for activities focused specifically to addressing the unique needs of low-income children or students, children with disabilities, English learners, racial and ethnic minorities, students experiencing homelessness, and foster care youth]

[Select Box] By completing this certification and the information below, I hereby confirm that I am an authorized representative, with the fiscal and legal authority, to report on behalf of this LEA. In addition, to the best of my knowledge and belief, all the information in this report is true and correct.

### **Contact Information**

First Name: [Enter First Name]

Last Name: [Enter Last Name]

Title: [Enter Title]

E-mail: [Enter E-mail Address]

Telephone Number: [Enter Telephone Number]

Telephone Extension (optional): [Enter Telephone Extension, if applicable]