**Alternative Evaluation Approach (AEA) Request Form**

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| **Grantee/Subgrantee Name** | *[Enter your organization name]* |
| **Program Name** | *[Enter your program name]* |
| **Application ID** | *[Enter your most recently submitted or awarded application ID]* |
| **Grant Number**  | *[Enter your 10- or 14-digit grant or subgrant number. If you do not yet have a grant/subgrant number, leave this field blank.]* |
| **Year Funded** | *[Enter the 4-digit fiscal year in which you requested or received recompete funding]* |
| **Grantee Size for Evaluation\*** | Choose an item. |
| **Requested AEA Type\*\*** | Choose an item. |
| **If Multiple AEA Types selected above, specify types** | *[Enter the requested AEA types]* |

**\*Grantee Size for Evaluation definitions**

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| **Size** | **Definition** |
| **Large** | Grantee is receiving an average of $500,000 per year or more from AmeriCorps during their current grant cycle |
| **Small** | Grantee is receiving an average of less than $500,000 per year from AmeriCorps during their current grant cycle, or is an EAP grantee |

**\*\*Requested AEA Type definitions**

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| **Type** | **Grantee Size** | **Description** |
| Structure of Program/Organization | Large grantees only | Grantee is requesting to conduct a non-impact evaluation for one or more of these reasons:* The grantee demonstrates insurmountable challenges to forming a comparison group
* It is not developmentally appropriate for the grantee to conduct an impact evaluation due to significant changes in program design or other evaluation readiness factors such as variability or lack of confirmed fidelity in the program model
 |
| Previous Impact Evaluation | Large grantees only | Grantee has previously conducted an impact evaluation of the same project and is requesting to conduct a different type of evaluation |
| Replication | Large grantees only | Grantee is implementing an evidence-based intervention with fidelity in a new setting and is requesting to conduct a non-impact evaluation |
| Timing | Large or Small grantees | Grantee is planning to conduct an evaluation that will not be completed during the current grant cycle and for which findings will not be available until a later date. |
| Funding Threshold | Large grantees only | Grantee is receiving less than $1 million in average yearly AmeriCorps funding for this grant cycle. |

**Required Explanations for All AEA Requests**

***Please justify how your AEA request meets each of the criteria below. Select from the available options where indicated. All fields are required.***

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| **Criteria** | **Justification** |
| The AEA request is appropriate for your grantee size | Choose an item. |
| The proposed approach will help you build your evidence base or is otherwise necessary | *[enter narrative justification]* |
| Your written evaluation plan is consistent with the AEA request and meets all standard requirements that are not modified by the AEA *(If you are requesting advance AEA approval before revising your evaluation plan, select the option “plan will be submitted later”.)* | Choose an item. |

**Required Explanations for Specific AEA Types**

***For all AEA type(s) you are requesting, please justify how your AEA request meets each of the criteria for that AEA type. (Leave the fields for the other AEA types blank.) Select from the available options where indicated.***

1. **Structure of Program/Organization**

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| **Criteria** | **Justification** |
| The challenges to forming a comparison group are not surmountable due to the nature of your program designORYour program design has changed significantly enough that it no longer meets the definition of “same project” (45 CFR § 2522.340)ORIt is not developmentally appropriate for you to conduct an impact evaluation at this time | *[enter narrative justification]* |
| The proposed alternative approach is the most rigorous option feasible  | *[enter narrative justification]* |
| A copy of a completed [Impact Evaluability Assessment Tool](https://www.americorps.gov/sites/default/files/document/2015_09_03_ImpactEvaluabilityAssessmentTool_ORE.pdf) is attached (optional) | Choose an item. |

1. **Previous Impact Evaluation**

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| **Criteria** | **Justification** |
| Your previous impact evaluation report was submitted as part of your recompete application | Choose an item. |
| Name and date of completion of your previous impact evaluation: | *[Enter name and date of impact evaluation]* |
| Your previous impact evaluation is still applicable to your current program design | *[enter narrative justification]* |
| Your recompete application was assessed by reviewers as having Moderate or Strong evidence | Choose an item. |
| Your recompete application received satisfactory assessments on the Evidence Quality review criteria | Choose an item. |

1. **Replication**

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| **Criteria** | **Justification** |
| The experimental/quasi-experimental study report(s) being replicated were submitted as part of your recompete application | Choose an item. |
| Name(s) and date(s) of completion of the replicated study/ies: | *[Enter name(s) and date(s) of study/ies being replicated]* |
| You will implement the intervention described in the study/ies with fidelity  | *[enter narrative justification]* |
| Your beneficiary population is similar to the beneficiary population described in the study/ies | *[enter narrative justification]* |
| Your recompete application was assessed by reviewers as having Moderate or Strong evidence | Choose an item. |
| Your recompete application received satisfactory assessments on the Evidence Quality review criteria | Choose an item. |

1. **Timing**

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| **Criteria** | **Justification** |
| The nature of the research questions or outcomes being studied require longer-term measurement that will extend beyond the three-year grant cycle | *[enter narrative justification]* |
| It will not be possible to submit an interim evaluation report with your recompete application that would meet your evaluation requirements | *[enter narrative justification]* |
| Timeframe in which you will submit your final evaluation report to AmeriCorps: | *[enter month and year when the final evaluation report will be submitted]* |

1. **Funding Threshold**

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| **Criteria** | **Justification** |
| Total awarded or requested federal share for each year in your current grant cycle: | *[enter awarded or requested federal share for each year in your current grant cycle]* |
| The average yearly AmeriCorps funding awarded for this grant cycle is less than $1 million per year | Choose an item. |
| You understand that if additional funding is awarded after AEA approval that pushes the average yearly federal share for your grant above $1 million per year, this AEA will be rescinded | Choose an item. |