**STATE ENERGY PROGRAM**

**ANNUAL FORMULA GRANT SUMMARY TEMPLATE**

**PY2019**

**July 1, 2019 – June 30, 2020 OR September 1, 2019 – August 31, 2020 OR October 1, 2019 – September 30, 2020**

This EERE template is provided for your convenience. Although the use of this template is not required, the data elements within the template are. Note this template was updated November 2019.

**Summary of Updates:**

1. Reduced reporting burden as States will only report on those activities where a verifiable impact occurred, an energy-related policy was adopted, or practices around emergency preparedness were improved;
2. Opportunity to identify technical assistance resources used to support the activity;
3. Clarification on how Annual Summaries are being used by DOE to communicate success; and,
4. Increased opportunity to highlight multiple-year efforts.

**Background:**

Each Program Year (PY), DOE will analyze Annual Summaries to capture those impacts that can be attributed specifically to the SEP Formula program. This will assist DOE in communicating these impacts to outside stakeholders using measurable and verifiable data. Therefore, going forward, we are asking States and Territories to summarize **only** those activities that led to a measurable, verifiable impact in PY(x) and fall within one of the four categories below:

1. Projects resulting in verifiable estimated or actual quantifiable energy savings and/or increased renewable energy capacity;
2. Projects resulting in verifiable estimated or actual jobs created;
3. Programs and initiatives resulting in adopted energy policies; and,
4. Programs resulting in updated resiliency and/or emergency plans and activities.

Please do not use the Annual Summary to describe activities where no measurable, verifiable impact was made in PY(x). Work towards goals, success stories, and lessons learned across your entire SEP Formula portfolio will be captured in PAGE quarterly performance reports.

The information you provide in this Annual Summary will also be used to expand peer matching, create mentoring initiatives, and better develop technical assistance resources.

Please read the directions for each section carefully and consult with your Project Officer for additional assistance.

|  |
| --- |
| **STATE:** **ORGANIZATION:** **GRANT NUMBER:**  |

|  |
| --- |
| Describe activities that resulted in verifiable estimated or actual **quantifiable impacts.** Examples of activities include (but are not limited to):* Building retrofits;
* Renewable installations;
* Workforce development; and/or,
* Loan, rebate, or grant programs.
 |
| **TITLE:****BRIEF DESCRIPTION OF ACTIVITY:****GOAL(S):** Please describe the goal of the activity including, if applicable, a description of barriers or knowledge gaps the activity sought to overcome. **PROJECT YEAR (PY) WORK BEGAN:** If the measureable impact occurring in PY(x) was a result of work initiated in previous program years, please share the year that work began. **IMPACTS:** Please describe achievements accomplished during PY(x) in terms of verifiable estimated or actual energy and monetary savings achieved, renewable energy capacity increased, electric vehicles added, and/or jobs created. **COSTS:** In order for DOE to accurately communicate the impact of SEP Formula funding,please estimate: 1. *The amount of SEP Formula funds* used to support the activity. If Formula funds were used to support the activity in previous program years, to the extent possible, please include those costs in the total broken out by program year.
2. *The amount of leveraged funding* used to support the activity. Where applicable, as a separate line item, please identify the amount of leveraged funding used to support the activity. If leveraged funds were used to support the activity in previous program years, to the extent possible, please include those costs in the total broken out by program year.

**TECHNICAL ASSISTANCE**: Please describe any technical assistance resources used, training utilized or provided, and/or stakeholders engaged that led to the success of this activity (i.e. federal, state, and local). **BEST PRACTICES/LESSONS LEARNED:** Please note any best practices or lessons learned.**LONG TERM IMPACTS:** If applicable, please describe how the success of this activity will be sustained or built upon in future program years.  |

|  |
| --- |
| Describe how SEP Formula funding was used to support activities that contributed to the **adoption** of anew or updated **energy policy.** Examples include (but are not limited to):* Implementation of more stringent energy codes;
* Signed energy related Legislation;
* Adoption of a new or updated State Energy Plan;
* Adoption of an Energy Efficiency Resource Standard (EERS), Renewable Energy Portfolio Standard (RPS), or other regulatory policy improvement; and/or,
* Signed policy promoting the use of Alternative Fuels and Infrastructure
 |
| **TITLE:** **BRIEF DESCRIPTION OF POLICY:** Please describe the action or policy enacted due, at least in part, to SEP Formula funds. Please be specific on the supporting role Formula funds played. **TECHNICAL ASSISTANCE**: Please describe any technical assistance resources used, training utilized or provided, and/or stakeholders engaged that led to the success of this activity (i.e. federal, state, and local).**BEST PRACTICES/LESSONS LEARNED:** Please note any best practices or lessons learned.**LONG TERM IMPACTS:** Please describe how your Office will continue to support the implementation, or enforcement of, the adopted policy.  |

|  |
| --- |
| Describe those activities that contributed to the adoption of an updated or new **emergency or resiliency plan or activities that contributed to enhanced preparedness**. Examples include (but are not limited to): * Updating or enhancing an existing emergency plan;
* Coordinating and/or or participating in emergency response exercises;
* Formally incorporating resiliency into rebuilding efforts; and/or,
* Contributions to a larger Statewide or regional emergency planning initiative.
 |
| **TITLE:** **BRIEF DESCRIPTION OF ACTIVITY:****PROJECT YEAR (PY) WHEN WORK BEGAN:** If the improvement occurring in PY(x) was a result of work initiated in previous program years, please share the year that work began. **TECHNICAL ASSISTANCE**: Please describe any technical assistance resources used, training utilized or provided, and/or stakeholders engaged that led to the success of this activity (i.e. federal, state, and local).**BEST PRACTICES/LESSONS LEARNED:** Please note any best practices or lessons learned. **ROLE OF ENERGY OFFICE:** If applicable, please describe how your Office will continue to support the implementation and/or enforce the adopted policy.  |

|  |
| --- |
| **Other** |
| **TITLE:** **BRIEF DESCRIPTION OF ACTIVITY:****PROJECT YEAR (PY) WORK BEGAN:** If the measureable impact occurring in PY(x) was a result of work initiated in previous program years, please share the year that work began. **GOAL(S):** Please describe the goal of the activity including, if applicable, a description of barriers or knowledge gaps the activity sought to overcome. **IMPACTS:** Please describe measureable impacts achieved during PY(x). **COSTS:** In order for DOE to accurately communicate the impact of SEP Formula funding,please estimate: 1. *The amount of SEP Formula funds* used to support the activity. If Formula funds were used to support the activity in previous program years, to the extent possible, please include those costs in the total broken out by program year.
2. *The amount of leveraged funding* used to support the activity. Where applicable, as a separate line item, please identify the amount of leveraged funding used to support the activity. If leveraged funds were used to support the activity in previous program years, to the extent possible, please include those costs in the total broken out by program year.

**TECHNICAL ASSISTANCE**: Please describe any technical assistance resources used, training utilized or provided, and/or stakeholders engaged that led to the success of this activity (i.e. federal, state, and local).**BEST PRACTICES/LESSONS LEARNED:** Please note any best practices or lessons learned. **LONG TERM IMPACTS:** If applicable,please describe how the success of this activity will be sustained or built upon in future program years.  |

|  |
| --- |
| **FEEDBACK** |
| **RECOMMENDATIONS:** Please share any recommendations that could improve the SEP Formula program. **TECHNICAL ASSISTANCE NEEDS:** In order for DOE to develop future products and resources, please identify technical assistance needs (or gaps) that could be filled.**OTHER COMMENTS:**  |