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|--|------------------------|---------------|--|
| DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report | FOR HRSA USE ONLY | | |
| | Institution: | | Program: NSL - Graduate Nursing |
| | Submission Tracking #: | Grant Number: | Reporting Period: 7/1/2014 - 6/30/2015 |

Page 1A: Student Borrower Data Section

| Student/Graduate Data | Cumulative (includes current year) | Current Year |
|---|---------------------------------------|--------------|
| 1. Number of Loans for the Nursing - Graduate discipline | 0 | 0 |
| 2. Total Dollar Amount of Loans Awarded for the Nursing - Graduate discipline | 0 | 0 |
| 3. Total Full-time enrollment for the Nursing - Graduate discipline for the academic year (both non-NSL and NSL recipients) | | 0 |
| 4. Total number of Defaulted Loans for the Nursing - Graduate discipline | 0 | 0 |
| 5. Total Original Defaulted Principal Loaned for Nursing - Graduate discipline | 0 | 0 |
| 6a. Total Number of Students who dropped out this year for the Nursing - Graduate discipline | | 0 |
| 6b. Of the number above, how many of them were NSL student borrowers | | 0 |
| 7a. Total Number of NSL Borrowers for the Nursing - Graduate discipline | 0 | 0 |
| 7b. Of the number of NSL borrowers for the Nursing - Graduate discipline above, number of Active and Non Retired/Defaulted Borrowers | 0 | |
| 8. Total Number of NSL students including those who graduated during this reporting period for the Nursing - Graduate discipline (Age and Gender details) | 0 | 0 |
| 9. Total Graduates (NSL - Nursing - Graduate Only) | 0 | 0 |
| 10. Number of NSL loan students including those who graduated during this reporting period that indicate an intention to serve in a medically underserved community | | 0 |
| 11. Number of NSL students including those that graduated during this reporting period that indicate an intention to practice in primary care | | 0 |
| 12. Number of NSL students and graduates during this reporting period from rural backgrounds | | 0 |
| Current Year Graduate Special Data | Number of Graduates | |
| 13. Total number of full time graduates (NSL loan recipients and Non-NSL) at your school during the current reporting period | 0 | |
| 13a. Of the total number in question 13, how many are URM graduates | 0 | |
| 13b. Of the total number in question 13, how many are non-URM graduates | 0 | |
| 14. Total number of full time NSL graduates during the current reporting period who indicate intent to practice in a rural area | 0 | |
| Prior Year Graduate Special Data for 2013 - 2014 Academic Year | Number of Graduates | |
| 15a. Total Number of NSL - Nursing - Graduate Loan Recipients who graduated in academic year 2013 - 2014 | | |
| 15b. Of the Total Graduates reported in question 15a, the Number of Full-Time NSL - Nursing - Graduate Graduates in academic year 2013 - 2014 serving in Medically Underserved Communities | 0 | |
| 15c. Of the Total Graduates reported in question 15a, the Number of Full-Time NSL - Nursing - Graduate Graduates in academic year 2013 - 2014 serving in Primary Care | 0 | |
| 15d. Of the Total Graduates in question 15a, the Number of Full-Time NSL - Nursing - Graduate Graduates in academic year 2013 - 2014 who entered the field for which they received their degree | 0 | |
| 15e. Of the Total Graduates reported in question 15a, the Number of NSL - Nursing - Graduate Graduates in academic year 2013 - 2014 who entered service in a rural area | 0 | |

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Page 1B: Student Race/Ethnicity Data Section

| Hispanic or Latino Students By Race | Enrollment of Discipline (A) | New Student Recipients (B) | Recipients Other Than New Who Did Not Graduate (C) | Recipients Other Than New Who Graduated (D) | Total Recipients (B+C+D) |
|--|------------------------------|----------------------------|--|---|--------------------------|
| A. American Indian or Alaska Native | 0 | 0 | 0 | 0 | 0 |
| B. Asian | 0 | 0 | 0 | 0 | 0 |
| C. Black or African-American | 0 | 0 | 0 | 0 | 0 |
| D. Native Hawaiian or Other Pacific Islander | 0 | 0 | 0 | 0 | 0 |
| E. White | 0 | 0 | 0 | 0 | 0 |
| F. More than one race | 0 | 0 | 0 | 0 | 0 |
| G. Race Not Reported | 0 | 0 | 0 | 0 | 0 |
| Total (A + B + C + D + E + F + G) | 0 | 0 | 0 | 0 | 0 |
| Non-Hispanic or Non-Latino Students By Race | Enrollment of Discipline (A) | New Student Recipients (B) | Recipients Other Than New Who Did Not Graduate (C) | Recipients Other Than New Who Graduated (D) | Total Recipients (B+C+D) |
| A. American Indian or Alaska Native | 0 | 0 | 0 | 0 | 0 |
| B. Asian | 0 | 0 | 0 | 0 | 0 |
| C. Black or African-American | 0 | 0 | 0 | 0 | 0 |
| D. Native Hawaiian or Other Pacific Islander | 0 | 0 | 0 | 0 | 0 |
| E. White | 0 | 0 | 0 | 0 | 0 |
| F. More than one race | 0 | 0 | 0 | 0 | 0 |
| G. Race Not Reported | 0 | 0 | 0 | 0 | 0 |
| Total (A + B + C + D + E + F + G) | 0 | 0 | 0 | 0 | 0 |

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Page 2: Program Accounts Section

| Program Accounts Section | | |
|--|---|-------------------|
| A. Federal Funds Awarded | Cumulative (\$) (includes current year) | Current Year (\$) |
| Federal Funds Awarded | 0 | 0 |
| B. Cash Balance - Start of Report Period | | Current Year (\$) |
| Cash Balance – Start of Report Period | | 0 |
| C. Cash Receipts | Cumulative (\$) (includes current year) | Current Year (\$) |
| 1. Federal Funds Received/Receivable | 0 | 0 |
| 2. Institutional Contributions Deposited | 0 | 0 |
| 3. Transferred from Scholarship Fund | 0 | 0 |
| 4. Loan Principal Collected | 0 | 0 |
| 5. Interest Income Collected on Loans | 0 | 0 |
| 6. Penalty Charges Collected on Loans | 0 | 0 |
| 7. Investment Income | 0 | 0 |
| 8. Institutional Repayments of Bad Debts, Principal | 0 | 0 |
| 9. Institutional Repayments of Bad Debts, Interest | 0 | 0 |
| 10. Institutional Repayments of Bad Debts, Penalty charges | 0 | 0 |
| C. Total | 0 | 0 |
| D. Cash Disbursements | Cumulative (\$) (includes current year) | Current Year (\$) |
| 1. Loaned to Students | 0 | 0 |
| 2. Transferred to Scholarship Fund | 0 | 0 |
| 3. Repayments to Federal Government, Principal | 0 | 0 |
| 4. Repayments to Federal Government, Interest | 0 | 0 |
| 5. Repayments to Federal Government, Other Income | 0 | 0 |
| 6. Repayments to Institution, Principal | 0 | 0 |
| 7. Repayments to Institution, Interest | 0 | 0 |
| 8. Repayments to Institution, Other Income | 0 | 0 |
| 9. Collection Agent Costs, Principal | 0 | 0 |
| 10. Collection Agent Costs, Interest | 0 | 0 |
| 11. Litigation Costs, Principal | 0 | 0 |
| 12. Litigation Costs, Interest | 0 | 0 |
| 13. Credit Bureau Fees | 0 | 0 |
| 14. Other Costs | 0 | 0 |
| D. Total | 0 | 0 |
| E. Cash Balance - End of Report Period | | Current Year (\$) |
| Cash Balance – End of Report Period | | 0 |

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Page 3: Program Accounts Section

| Program Accounts Section | | | | | | | | |
|---|------------------------------------|----------------|---------------|----------------------|---------------------|----------------|---------------|----------------------|
| F.1. Loan Cancellations to Borrowers – Professional Practice | | | | | | | | |
| Description | Cumulative (Includes Current Year) | | | Current Year | | | | |
| | Number of Borrowers | Principal (\$) | Interest (\$) | Number of Borrowers | Principal (\$) | Interest (\$) | | |
| a. HP Practice – Shortage (10%) | N/A | | | N/A | | | | |
| b. HP Practice – Rural Shortage (15%) | N/A | | | N/A | | | | |
| F.1. Total | | | | | | | | |
| F.2. Loan Cancellations to Borrowers – Nursing Employment | | | | | | | | |
| Description | Cumulative (Includes Current Year) | | | Current Year | | | | |
| | Number of Borrowers | Principal (\$) | Interest (\$) | Number of Borrowers | Principal (\$) | Interest (\$) | | |
| a. Nursing Employment (10%) | 0 | 0 | 0 | N/A | | | | |
| b. Nursing Employment (15%) | 0 | 0 | 0 | N/A | | | | |
| c. Nursing Employment (20%) | 0 | 0 | 0 | N/A | | | | |
| d. Nursing Employment (15%) on or after 03/23/2010 | | 0 | 0 | 0 | 0 | 0 | | |
| e. Nursing Employment (20%) on or after 03/23/2010 | | 0 | 0 | 0 | 0 | 0 | | |
| f. Nursing Employment (Other) on or after 03/23/2010 | | 0 | 0 | 0 | 0 | 0 | | |
| F.2. Total | 0 | 0 | 0 | 0 | 0 | 0 | | |
| F.3. Loan Cancellations to Borrowers – Death | | | | | | | | |
| Description | Cumulative (Includes Current Year) | | | Current Year | | | | |
| | Number of Borrowers | Principal (\$) | Interest (\$) | Number of Borrowers | Principal (\$) | Interest (\$) | | |
| a. On Loans made on or after 10/22/85 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| b. On Loans except those made after F.3.a | 0 | 0 | 0 | 0 | 0 | 0 | | |
| F.3. Total | 0 | 0 | 0 | 0 | 0 | 0 | | |
| F.4. Loan Cancellations to Borrowers – Permanent & Total Disability Approved by HHS | | | | | | | | |
| Description | Cumulative (Includes Current Year) | | | Current Year | | | | |
| | Number of Borrowers | Principal (\$) | Interest (\$) | Number of Borrowers | Principal (\$) | Interest (\$) | | |
| a. On Loans made on or after 10/22/85 | 0 | 0 | 0 | | 0 | 0 | | |
| b. On Loans except those reported in F.4.a. | 0 | 0 | 0 | 0 | 0 | 0 | | |
| F.4. Total | 0 | 0 | 0 | 0 | 0 | 0 | | |
| G. Bad Debts Approved For Write-Off By HHS | | | | | | | | |
| Description | Cumulative (Includes Current Year) | | | | Current Year | | | |
| | Number of Borrowers | Principal (\$) | Interest (\$) | Penalty Charges (\$) | Number of Borrowers | Principal (\$) | Interest (\$) | Penalty Charges (\$) |
| Total Approved | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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|--|---|--------------|---------------------------------|------------------------|---------------|--|--|
| DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report | FOR HRSA USE ONLY <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Institution:</td> <td style="width:50%;">Program: NSL - Graduate Nursing</td> </tr> <tr> <td>Submission Tracking #:</td> <td>Grant Number:</td> </tr> <tr> <td colspan="2" style="text-align: right;">Reporting Period: 7/1/2014 - 6/30/2015</td> </tr> </table> | Institution: | Program: NSL - Graduate Nursing | Submission Tracking #: | Grant Number: | Reporting Period: 7/1/2014 - 6/30/2015 | |
| Institution: | Program: NSL - Graduate Nursing | | | | | | |
| Submission Tracking #: | Grant Number: | | | | | | |
| Reporting Period: 7/1/2014 - 6/30/2015 | | | | | | | |

Page 5: Program Accounts Section

| | | |
|---|----|------|
| Program Accounts Section | | |
| H. Default Rate (Pre-populated. No entry required) | | |
| 1. Default Rate (%) | | 0 |
| For Active Schools | | |
| 2. Excess cash(\$) from report page 4 that was or will be returned to PMS | | 0 |
| 3. Excess cash(\$) from report page 4 that was or will be returned to the Division of Financial Operations | | 0 |
| For Closing Schools | | |
| 4. Amount of cash(\$) determined to be due to the federal government and remitted separately to the division of Financial Operations | | 0 |
| I. Checklist/Questions | | |
| 1. What is the total amount (\$) of interest that is due? | | 0 |
| 2. Does your institution provide for a biennial audit of your program or school funds by a qualifying independent auditor? Yes | | |
| <input type="checkbox"/> Yes (provide the detail below) <input type="checkbox"/> No (proceed to the next question) | | |
| Audits | | |
| a. Period of last audit - Start Date | MM | YYYY |
| b. Period of last audit - End Date | | |
| c. Date audit submitted to Regional Audit Agency | | |

OMB Number: 0915-0044
 Expiration Date: 01/31/2018

Sample

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Page 6: Program Accounts Section

| Program Accounts Section | | | | | | | | | | | |
|---|-------------------------|---------------------------|---------------------------|--------------------------------|---------------------------|-------------------------------|---|--|--------------------------------|--------------------------------|--|
| 1. Fully Retired | | | | | | | | | | | |
| Description | Number of Borrowers (1) | Principal Loaned (\$) (2) | Principal Repaid (\$) (3) | Principal Cancelled | | Principal Delinquent (\$) (6) | Principal Uncollectible Not Past Due (\$) (7) | Principal Outstanding but Not Due (\$) (8) | Principal Written Off (\$) (9) | Capitalized Interest (\$) (10) | Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (11) |
| | | | | Employment/Prof Pract (\$) (4) | Death/Disability (\$) (5) | | | | | | |
| A. Repayment/Cancellation | 0 | 0 | 0 | 0 | | | | | | | 0 |
| B. Cancellation/Death | 0 | 0 | 0 | 0 | 0 | | | | | | 0 |
| C. Cancellation/Disability | 0 | 0 | 0 | 0 | 0 | | | | | | 0 |
| D. Discharged in Bankruptcy | 0 | 0 | 0 | 0 | | | 0 | | | | 0 |
| E. HHS Approved Write-Off | 0 | 0 | 0 | 0 | | | | | 0 | | 0 |
| F. Uncollectible per P.L. 107-205 | 0 | 0 | 0 | 0 | | | | | 0 | | 0 |
| 1. Total (Sum of Row A through F) | 0 | 0 | 0 | 0 | 0 | | 0 | | 0 | | 0 |
| 2. Current | | | | | | | | | | | |
| Description | Number of Borrowers (1) | Principal Loaned (\$) (2) | Principal Repaid (\$) (3) | Principal Cancelled | | Principal Delinquent (\$) (6) | Principal Uncollectible Not Past Due (\$) (7) | Principal Outstanding but Not Due (\$) (8) | Principal Written Off (\$) (9) | Capitalized Interest (\$) (10) | Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (11) |
| | | | | Employment/Prof Pract (\$) (4) | Death/Disability (\$) (5) | | | | | | |
| A. Student Status | 0 | 0 | 0 | 0 | | | | 0 | | | 0 |
| B. Grace Period | 0 | 0 | 0 | 0 | | | | 0 | | | 0 |
| C. Deferment Status | 0 | 0 | 0 | 0 | | | | 0 | | | 0 |
| D. Postponement/Cancellation | 0 | 0 | 0 | 0 | | | | 0 | | | 0 |
| E. Repayment - Not Past Due | 0 | 0 | 0 | 0 | | | | 0 | | | 0 |
| F. Past Due 1-119 Days | 0 | 0 | 0 | 0 | | | 0 | 0 | | | 0 |
| 2. Total (Sum of Row A through F) | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | | | 0 |
| 3. In Bankruptcy | | | | | | | | | | | |
| Description | Number of Borrowers (1) | Principal Loaned (\$) (2) | Principal Repaid (\$) (3) | Principal Cancelled | | Principal Delinquent (\$) (6) | Principal Uncollectible Not Past Due (\$) (7) | Principal Outstanding but Not Due (\$) (8) | Principal Written Off (\$) (9) | Capitalized Interest (\$) (10) | Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (11) |
| | | | | Employment/Prof Pract (\$) (4) | Death/Disability (\$) (5) | | | | | | |
| A. Pending Discharge/Wage Earners Agreement | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | | | 0 |

| 4. In Default | | | | | | | | | | | |
|----------------------|-------------------------|---------------------------|---------------------------|--------------------------------|---------------------------|-------------------------------|---|--|--------------------------------|--------------------------------|---|
| Description | Number of Borrowers (1) | Principal Loaned (\$) (2) | Principal Repaid (\$) (3) | Principal Cancelled | | Principal Delinquent (\$) (6) | Principal Uncollectible Not Past Due (\$) (7) | Principal Outstanding but Not Due (\$) (8) | Principal Written Off (\$) (9) | Capitalized Interest (\$) (10) | Reconciling Difference (Column 2 + Column 10 – Sum of Columns 3 through 9) (\$) |
| | | | | Employment/Prof Pract (\$) (4) | Death/Disability (\$) (5) | | | | | | |
| A. 120 Days and Over | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | | | 0 |
| 5. Forbearance | | | | | | | | | | | |
| Description | Number of Borrowers (1) | Principal Loaned (\$) (2) | Principal Repaid (\$) (3) | Principal Cancelled | | Principal Delinquent (\$) (6) | Principal Uncollectible Not Past Due (\$) (7) | Principal Outstanding but Not Due (\$) (8) | Principal Written Off (\$) (9) | Capitalized Interest (\$) (10) | Reconciling Difference (Column 2 + Column 10 – Sum of Columns 3 through 9) (\$) |
| | | | | Employment/Prof Pract (\$) (4) | Death/Disability (\$) (5) | | | | | | |
| A. Forbearance | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | | | 0 |
| Total | 0 | | | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |

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Comments and Certification

| Role | Name | Phone | Email |
|----------------------------|------|-------|-------|
| Primary Point of Contact | | | |
| Alternate Point of Contact | | | |

Certification

I am authorized to submit this report to HRSA.

| | |
|--------------------------------|--|
| Authorized Certifying Official | |
| Date Report Submitted | |

| | |
|--------------------------|-----|
| Future Support Required: | Yes |
|--------------------------|-----|

Comments

Sample