**QUARTERLY PROGRESS REPORT**

## **Progress Report Due Dates**

##### Due Date Period Ending

**02/01 12/31**

**05/01 03/31**

**08/01 06/30**

**\*Please submit one original separate cumulative summary on 11/01**

## **Grant #**

|  |  |  |  |
| --- | --- | --- | --- |
| **Agency Name:**  |  | **Project Title:**  |  |
| **Address:**  |  | **Report for Period Ending:** |  |
|  |  | **Total Grant Award:** |  |
| **Federal Share:** |  | **Expenditures this Period:**  |  |
| **Match:** |  | **Expenditures to date:** |  |

**Signature: Date:**

**PART ONE - NARRATIVE: List project objectives and indicate the progress toward fulfilling the stated objectives in a narrative paragraph following each. These paragraphs should include activities and tasks accomplished during this period. Also, indicate problems in accomplishing tasks in a timely manner. If needed, attach additional pages and supporting materials.**

**Objective 1:**

**Narrative:**

**Objective 2:**

**Narrative:**

**Objective 3:**

**Narrative:**

**Objective 4:**

**Narrative:**

**Objective 5:**

**Narrative:**

**Objective 6:**

**Narrative:**

**Objective 7:**

**Narrative:**

**Objective 8:**

**Narrative:**

**Objective 9:**

**Narrative:**

**Objective 10:**

**Narrative:**

**Objective 11:**

**Narrative:**

**PART TWO - PROJECT STATUS**

**1. Will the project be completed on schedule? If not, indicate a timeframe for completion and the reason for the delay.**

**2. List any technical assistance needs identified during this period (financial, programmatic,**

**etc.).**

**PART THREE - PRESS COVERAGE ACHIEVED: Describe any press coverage achieved during the period. Attach copies of press clippings, press releases, media advisories, tapes of coverage, etc.**

**PART FOUR - STATUS OF EQUIPMENT PURCHASES:**

**1. Has all equipment in the approved grant budget been ordered? \_\_\_\_\_Yes \_\_\_\_\_\_ No**

**2. If "no" to Question #1, explain status:**

**3. Date equipment placed in service**

**PART FIVE - STATUS OF PERSONNEL:**

**1. Number of personnel to be hired on grant: \_\_\_\_\_\_\_**

**2. Date personnel hired: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. Number uniformed personnel funded by grant: \_\_\_\_\_\_\_\_\_\_ Total by Department: \_\_\_\_\_**

**Quarterly Enforcement Data Reporting Form**

(For Traffic Enforcement Projects Only)

|  |  |  |
| --- | --- | --- |
| **Violation** | **Persons Performing Grant Activity Hours Only**  | **Department Totals** **(Excludes Violations Written by Persons Performing Grant Activity Hours)** |
|
| DUI  |  |  |
| Safety Belt  |  |  |
| Child Safety Seat  |  |  |
| Speeding |  |  |
| Driving Under Suspension |  |  |
| No Driver’s License |  |  |
| GDL Violations |  |  |
| Uninsured Motorists |  |  |
| Other Traffic Violations  |  |  |
| Written Warnings Issued |  |  |
| Failure to yield right-of-way, following too closely, disregarding sign/signal, improper turn, and improper lane change |  |  |

**List of Presentations/ Outreach Activities Completed this Period**

**Attach supporting documentation for each presentation listed in the table below. Supporting documentation may include sign-in sheets, photos taken during the presentation, educational materials and handouts, and/or correspondence scheduling and/or confirming the presentation.**

**Date of Activity Topics Covered Name of Group No. Present**

|  |  |  |  |
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**Total Presentations/Activities this Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Presentations/Activities to Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Persons Reached this Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Persons Reached to Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**