**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.

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| **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:** |

**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.

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

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**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.

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

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

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

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3. Date equipment placed in service

**PART FIVE - STATUS OF PERSONNEL:**

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1. Number of personnel to be hired on grant:

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2. Date personnel hired:

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3. Number uniformed personnel funded by grant: Total by Department:

**MONTHLY EDUCATIONAL PROJECT REPORT**

**Attach supporting documentation for each educational session/presentation listed in the table below. Supporting documentation may include sign-in sheets, photos taken during the session/presentation, educational materials and handouts, pre and posttests, programmatic evaluations, etc.**

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| --- | --- | --- | --- |
| **Date** | **Topics Covered** | **Location/Name of Group/Event Name** | **No. Present** |
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**Total Educational Sessions/Presentations this Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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