

**Training and Technical Assistance
Semi-Annual Status Report**

Awardee Name: <<Awardee Legal Name>>

Reporting Period: <<Dates>>

Project Director: <<Name>>

A. Staffing

1. *Changes in the Institute staff, their duties, or the percentage of time devoted to Institute activities.*
2. *New staff, consultants and/or contractors. (please include vitae unless previously submitted)*

A. Budget

1. *Changes or modifications to the budget and corresponding grant number (if applicable).*
2. *What is your projected end date if different from your original end date? If different, please explain.*
3. *Number of consultant/trainers that received travel stipends.*

B. Deliverables

1. *Completed Training*

Grant Number	Number of Courses

2. *Products Developed*

Grant Number	Product Type*	Product Name	Partner (if applicable)

**examples of Product Type: videos, curricula, publications, etc. If curricula, indicate whether curricula is new or revised.*

3. *Conference Activity During Reporting Period (if applicable)*

- *Theme and topics covered or presented.*
- *Locations of and dates of conference.*

C. Partnership Involvement

1. *Meetings held or attended. (attach minutes and/or reports generated)*
2. *Changes in partnership arrangements and/or additional partners.*
3. *Involvement in training delivery and/or development.*
4. *Number of trainings attended by partners.*

D. Outreach

- E. *Activities and/or programs conducted.*
- F. *Program marketing efforts.*
- G. *Interaction/networking with the RCPI Network.*

Prepared by: _____ Date: _____

Approved by: _____ Date: _____

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