



**U.S. Department of Justice**  
Office of Community Oriented Policing Services  
*Grants Administration Division*

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1100 Vermont Avenue, NW  
Washington, D.C. 20530

**Agency Name:** «agency\_name»  
**ORI #:** «ori»

## **Tribal Resources Grant Program (TRGP) Equipment and Training Progress Report**

**Due Date:** \_\_\_\_\_

**Reporting Period:** xx/xx/xxxx to xx/xx/xxxx

Tribal Resources Grant Program (TRGP) Progress Reports are required by the COPS Office on an annual basis during the life of the grant. This report must be filled out completely even if your department has not yet implemented your TRGP grant. It must be completed and returned within 45 days of its receipt. Failure to submit complete reports, or submit them in a timely manner, may result in the suspension and possible termination of your agency's COPS grant funding or other remedial actions.

**Please return the completed form to:**

**U.S. Department of Justice**  
**Office of Community Oriented Policing Services**  
**ATTN: Tribal Control Desk, Progress Reports, 8<sup>th</sup> Floor**  
**1100 Vermont Avenue, NW**  
**Washington, D.C. 20530**

*(For overnight delivery, please use 20005 as the zip code)*

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- Training/Investigations/Uniforms**
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- Change of Information**

Agency Name: «agency\_name», ORI: «ori»

Grant Number: «grant\_num»

## CERTIFICATION OF INFORMATION

*Please type or print*

Person Completing the Form

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

\_\_\_\_\_

Title

Phone Number of Person Completing the Form \_\_\_\_\_

Fax Number of Person Completing the Form \_\_\_\_\_

E-mail Address of Person Completing the Form (if applicable) \_\_\_\_\_

By signing below, I certify that the information provided on this form is true and accurate to the best of my knowledge and belief. I understand that false statements or claims made in connection with COPS grant awards may result in fines, imprisonment, debarment from participating in federal grants or contracts, and/or any other remedy available by law to the federal government. Please be advised that a hold may be placed on COPS grant awards if it is deemed that the agency is not in compliance with federal civil rights laws and/or is not cooperating with an ongoing federal civil rights investigation.

Signature of Person Completing the Form

_____	Date Signed ____/____/____
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Signature of Law Enforcement Executive

_____	Date Signed ____/____/____
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## TRGP Equipment and Training Progress Report

### Training/Investigations/Uniforms

*Instructions: Your Final Funding Memo (included with this report) gives a complete account of all equipment and training awarded under your TRGP grant number <<grant\_num>>. Please refer to your Final Funding Memo in completing the following pages of the TRGP Progress Report.*

#### Training

***If your agency was NOT awarded training, please answer “N/A.”***

1. Has your agency received all training awarded under this TRGP grant?
- Yes       No       N/A

#### Background Investigations

***If your agency was NOT awarded funding for background investigations, please answer “N/A.”***

2. Has your agency completed all background investigations awarded under this TRGP grant?
- Yes       No       N/A

#### Uniforms

***If your agency was NOT awarded uniforms, please answer “N/A.”***

3. Has your agency purchased all uniforms awarded under this TRGP grant?
- Yes       No       N/A

***If you answered “No” to any of the above questions, please type an explanation in the space below.***

Agency Name: «agency\_name», ORI: «ori»

Grant Number: «grant\_num»

## Equipment/Technology/Vehicles

*Instructions: Your Final Funding Memo (included with this report) gives a complete account of all equipment, technology, and vehicles awarded under your TRGP grant number <<grant\_num>>. Please refer to your Final Funding Memo in completing the following questions of the TRGP Progress Report.*

### Basic Issue Equipment

***If your agency was NOT awarded basic issue equipment, please answer “N/A.”***

4. Has your agency purchased all basic equipment awarded under this TRGP grant?

- Yes       No       N/A

### Technology

***If your agency was NOT awarded technology, please answer “N/A.”***

5. Has your agency purchased all technology awarded under this TRGP grant?

- Yes       No       N/A

### Cars and Other Vehicles

***If your agency was NOT awarded vehicles, please answer “N/A.”***

6. Has your agency purchased all vehicles awarded under this TRGP grant?

- Yes       No       N/A

***If you answered “No” to any of the above questions, please type an explanation in the space below.***

Agency Name: «agency\_name», ORI: «ori»  
Grant Number: «grant\_num»

As of the date of this report, the end date for grant number <<xxxxHEWXxxx>> is <<xx/xx/xxxx>>. If the end date has passed, please be advised that no additional extensions will be approved.

*If your agency is unable to complete the implementation of the awarded project before the grant end date, you may request a no-cost extension for additional time. Your request must be made before the end date and must include:*

- Grant program, ORI and grant number*
- Any setbacks that have caused the delay in grant implementation*
- The amount of equipment/training left to purchase, and*
- The new end date you are requesting.*
- If the new end date is more than 18 months beyond the original end date of the grant, you must include a timeline showing when all remaining purchases will be made.*

## **Section IV**

*Instructions: Listed below is the information our office has on file for your agency. If there have been any changes, please enter the corrected information on the “Change of Information Sheet” located on the next page.*

### **Law Enforcement Executive Information:**

**Law Enforcement Executive Name:** «chief\_exec\_first\_name» «chief\_exec\_last\_name»

**Law Enforcement Executive Title:** «chief\_exec\_title»

**Law Enforcement Agency Address:** «agency\_address1»

«agency\_city», «agency\_state» «agency\_zip»

**Law Enforcement Agency Phone #:** «agency\_phone»

**Law Enforcement Agency Fax #:** «agency\_fax»

### **Tribal Government Executive Information:**

**Government Executive Name:** «govt\_exec\_first\_name» «govt\_exec\_last\_name»

**Government Executive Title:** «govt\_exec\_title»

**Government Executive Address:** «agency\_address1»

«govt\_exec\_city», «govt\_exec\_state» «govt\_exec\_zip»

**Government Executive Phone #:** «govt\_exec\_phone»

Agency Name: «agency\_name», ORI: «ori»  
Grant Number: «grant\_num»

**Government Executive Fax #:** «govt\_exec\_fax»

*Paperwork Reduction Act Notice:* A person is not required to respond to a collection of information unless it displays a valid OMB control number. The public reporting burden for this collection of information is estimated to be up 1/2 hour per response, which includes time for reviewing documentation. Send comments regarding this burden estimate or any other aspects of the collection of this information, including suggestions for reducing this burden, to the COPS Office; 1100 Vermont Avenue, NW; Washington, D.C. 20530, and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.