Part 1.	**PAPER FACSIMILE**

PAPER FACSIMILE
Senior Corps Project Progress Report
Shaded Areas Auto-Populated by eGrants

Sponsor: _____   Project Name: _____
Address: _____   Project Director: _____
City/State/Zip: _____   Telephone: (_____) _____ - _____ ext. _____
Fax: (_____) _____ - _____ Email: _____

Grant Number: _____
Budget Period: (1   2   3   4)

Period Covered by This Report
From: __ __/ __ __/ __ __ __ __ To: __ __/ __ __/ __
__ __ __
         M   D   Y   M   D   Y

A. Program Covered: RSVP   FGP   SCP
B. Demonstration Grant: _____

Overview
The Senior Corps **Project Progress Report (PPR)** is used by project sponsors/project directors to report grant activities and progress. Frequency of reporting is semi-annually. The PPR **does not** report financial information, which is reported through Federal Financial Report.

Part 1 – Narrative – Annual Submission
- Section 1: Work Plan Accomplishments and Progress
- Section 2: Challenges Encountered
- Section 3: Technical Assistance Requested

Narrative Section 1: Work Plan Accomplishments and Progress

Updated Work Plan: Updated project work plans from Part III, Section C of the grant application with Columns C and D to reflect accomplishments and progress during this reporting period.

Narrative Section 2: Challenges Encountered

In narrative format, please report any challenges encountered during this reporting period in the categories listed below. Be sure to include whether challenges have been resolved or remain unresolved and plans to address them.

A.   Project Service Area   C. Project Planning
B.   Community Needs   D. Organizational Capacity and Sustainability

Narrative Section 3: Technical Assistance Requested

Instructions: Describe non-monetary assistance requested from the Corporation for National Service regarding management and support of the project and its volunteers.

- Public reporting burden for this collection of information is estimated to average 4 hours per submission, including reviewing instructions, entering and maintaining the data needed, and completing the form. Comments on the burden or content of the instrument may be sent to the Senior Corps, Corporation for National Service, 1201 New York Avenue, NW, Washington, DC 20525.
- 5 C.F.R. 1320. 5(b)(2)(i): Project sponsors are not required to respond to the collection of information unless it displays a currently valid OMB control number, which is indicated below.

Signature of Project Director	Signature of Sponsor Executive	
Date	Typed Name:	
	Title:	Date:

Part 2 – Volunteer Service Year Production	**Used by FGP and SCP Only Semi-Annual Submission**
Total number of cumulative stipended volunteer hours served	
Total number of active stipended volunteers serving	
Total number of cumulative non-stipended volunteers hours served	
Total number of activie non-stipended volunteer serving	

Part 3 – Data Supplement/Project Profile and Volunteer Activity **Data Category and Element**	**Annual Submission**
Volunteer Demographics	**Section**
Age Group	**Volunteers**

55 to 60	
61 to 64	
65 to 74	
75 to 84	
85 and over	

Gender	**Volunteers**
Female	
Male	

Ethnicity	**Volunteers**
Hispanic or Latino	
Non-Hispanic or Non-Latino	

Racial Group	**Volunteers**
American Indian or Alaskan Native	
Asian	
Black or African American	
Native Hawaiian or Pacific Island	
White	

Service Information	
Volunteers	**Volunteers**
Total number of Volunteers	
No. RSVP Vols. serving to mobilize volunteers for other organizations	**Used by RSVP Only**
No. RSVP Volunteers recruited by RSVP Volunteers	
No of new non-RSVP Vols. mobilized by RSVP vols. to serve in other orgs	
Volunteer Leaders	**Used by SCP Only**
Number of Senior Companion Leaders	
Senior Companions recruited by Senior Companion Leaders	
Community Volunteers recruited by Senior Companion Leaders	
Ages of Clients Served	**Used by FGP and SCP Only**
Clients Served	
Total number served	
Number of awaiting service of a volunteer	

Hours Served	**Volunteers**
Volunteers Separated	**Volunteers**
Client Information	**# of Clients**
Total number of children of prisoners served	**Used by RSVP and FGP Only**
Total number of children in foster care served	
Number of adult ex-offenders served	
Total number of Immigrants served	
Number of independent living clients served	**Used by SCP and RSVP Only**
Number of caregivers of independent living clients served with respite	

Stations		
Faith-Based Stations	**Stations**	**Vols**
Total number of Faith-Based Stations/Volunteers		
Total number of Disaster-Services Volunteer Stations/Volunteers		