Quarterly Performance Report Form ETA-9104
National Emergency Grant Electronic Application System

Grantee:
Grant #:
Project Type:
Project:
Grant Quarter:
Performance Period Covered by this Report:

Receiving Intensive Services	
Enrolled In NEG-Funded Training	
Receiving NEG-Funded Supportive Services	
Receiving NEG-Funded Supportive Services	
Exits	
Entering Employment At Exit	
Total Participants	
Supportive Services	
Program Management & Oversight	
Administration, excl. NRP Processing*	
Other	
Total—Program Management and Oversight	
Indirect	
Other	
Total Expenditures: Grantee Level	
Core and Intensive Services	
NEG-Funded Training	
NEG-Funded Supportive Services	
Program Management & Oversight	
Other	
Total—Program Management & Oversight	
Other	
Total Expenditures: Project Operator Level	
Total Expenditures: Grantee and Project Operator	