

Attachment E – Quarterly Progress Report Form

FY 2017 Team Nutrition (TN) Training Grant

Quarterly Progress Report

Name of State: _____

For the reporting period of _____ to _____

NOTE: This report may be required to be submitted through an electronic platform.

Use additional space as needed to answer each question.

1. Briefly describe what the planned activities were for the report period.
2. Describe major accomplishments for each activity. Include the: activity; date; audience; participation numbers (unduplicated and duplicated); evaluation methods and pre-tested measurement tools. Provide copies of developed materials, if applicable.
3. Describe any deviations from proposed plan; discuss difficulties encountered and solutions developed.
4. Briefly discuss the budget impact and /or costs associated with in this reporting period. Are the **actual expenditures** (dollars and /or percentage) this quarter in line with what you had **planned**, per your grant timeline? If not, explain why.
5. List key activities planned for next quarter.
6. Any other unique aspects that you would like to share.
7. Other Comments?

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