| [NOFO Title]                                       |                 |                 |  |
|--|-----------------|-----------------|--|
| [NOFO Number] Work Pl                              | an and Progress | Report Template |  |
| OMB Approval Number: 0920-1132                     |                 |                 |  |
| Expiration Date: XX/XX/XXXX                        |                 |                 |  |
| Recipient Name: Performance Year: Submission Date: |                 | ]<br>]<br>]     |  |
|  |                 |                 |  |
|  |                 |                 |  |

| Strategy Title                       |  |
|--------------------------------------|--|
| Strategy Description                 |  |
| Sub-Strategy Title                   |  |
| Sub-Strategy Description             |  |
| Priority Population(s)               |  |
| Geographic Areas                     |  |
| Key Deliverables/Outputs<br>Proposed |  |
|                                      |  |

| Progress Reporting                   |  |  |
|--------------------------------------|--|--|
| Key Deliverables/Outputs<br>Produced |  |  |
| Successes                            |  |  |
| Barriers/Challenges                  |  |  |

| Activity Number | Setting |
|-----------------|---------|
| 1.01            |         |
| 1.02            |         |
| 1.03            |         |
| 1.04            |         |
| 1.05            |         |
| 1.06            |         |
| 1.07            |         |
| 1.08            |         |
| 1.09            |         |
| 1.10            |         |

- Additional rows can be added to this table to capture
- $-% \left( -\right) =-\left( -\right)$

- The agency may provide guidance on format and pu how to map activities to specific strategies or program/
- The agency may provide guidance on the level of d $\epsilon$

|  | Lead Derconnel |
|--|----------------|

| Activity Description | Milestone? | Lead Personnel<br>Assigned |
|----------------------|------------|----------------------------|
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e additional years or time periods as may be required by the NOFO. litional strategies as required by the NOFO.

irpose of each field, and whether it is required. For example, an agency may prescribe specific activities priority areas, or may leave the determination to the recipient. etail and types of activities identified.

Progress Rep

| Contributing Partners | Key Contracts<br>& Consultants | Start Date | End Date | Status |
|-----------------------|--------------------------------|------------|----------|--------|
|                       |                                |            |          |        |
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, may prescribe

| orting         |  |  |  |  |
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| Progress Notes |  |  |  |  |
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