2) Monthly meeting Agenda

SAMHSA 988 Tribal Response Grant Program
Monthly meeting agenda

Grant information	
Award Number	Add award number here
Project Title	Add project title here
Tribe/ Organization	Add Tribe/Organization name
Project Director	Add name
GPO	Add name
Project Period	MM-DD-YY to MM-DD-YY
Budget Year	MM-DD-YY to MM-DD-YY
Award Amount	Add current budget award amount here

- **Major updates on your milestone plan for the grant.** *Please also provide detailed updates in the chart below.*
    - o [update here]
- **Information or feedback that may improve the quality of the 988 Lifeline response for your community.** *This may include sharing relevant protocols, policies, training materials, challenges you're having, or wins you'd like to share.*
    - o [update here]
- **Any changes in scope, implementation, or personnel?**
    - o [update here]
- **Additional updates for the month (challenges, successes, support needs).**
    - o [update here]
- **Fiscal/Budget Updates (Award Amount, YTD, Remaining)**
- **Questions for your GPO.**
    - o [update here]

Grant goal updates			
Goal	**Description**	**To be completed by**	**Progress**
1			
1.1			

1.2			
2			
2.1			
2.2			

Grant goal updates			
Go al	**Description**	**To be complet ed by**	**Progress**
1			
1.1			
1.2			
2			
2.1			
2.2			

Please propose additions or modifications to this agenda as needed.