

## **QUARTERLY GRANT NARRATIVE REPORT INSTRUCTIONS**

### **SECTION 1 – GRANTEE INFORMATION**

Enter your grant title, grant number, grantee name, grantee mailing address, phone number and name of the person completing the narrative report.

### **SECTION 2- REPORTING PERIOD**

Mark the appropriate box for the date span that the report data reflects.

### **SECTION 3- VICTIMS SERVED**

Enter the total number of unduplicated individuals/victims served during the current reporting period. For Q2-Q4 reports update the values in the appropriate box. Do not remove the values entered in previous quarters so an accurate year to date value can be calculated. **The total is calculated automatically when the TAB key is used to move to the next field.** You will not be able to enter a figure in “Total to Date”.

### **SECTION 4- GOALS AND OBJECTIVES PERFORMANCE REPORT**

**GOALS AND OBJECTIVES:** Enter the goals and objectives stated in your grant application. The goals and objectives for your project are on the Budget Details, Goals & Objectives, & Project Evaluation tab in ZoomGrants.

**PROGRESS/MEASUREMENT:** Provide an update on the progress on each of the stated goals associated with your project.

- Describe actions and/or activities that have occurred in the quarter to achieve the objective listed.
- Data (numerical measurement) should be provided (if applicable).
- If your grant includes personnel, please include information on the number of hours works during this quarter and the number of grant related hours worked.
- Include information about any innovative actions, accomplishments or other information that may be helpful in evaluating the effectiveness of your program.
- If your objective includes training or presentations, please include the number of participants and the topics covered.

**THE GRAY TEXT BOXES WILL EXPAND AND WRAP THE TEXT TO THE NEXT LINE AS TEXT IS ENTERED.**

## **SECTION 5 – IMPLEMENTATION/BUDGET ISSUES**

**DELAYS IN IMPLEMENTATION OF OBJECTIVES:** Describe the any discrepancies between the project plan timetable and the actual progress of your funded program.

**PROBLEMS/ISSUES ARISING DURING GRANT PERIOD:** Describe any budget problems and associated solutions that have developed during the reporting period in the boxes provided.

**THE GRAY TEXT BOXES WILL EXPAND AND WRAP THE TEXT TO THE NEXT LINE AS TEXT IS ENTERED.**

## **SECTION 6 – PROJECT DIRECTOR CERTIFICATION AND SIGNATURE**

The form must be signed and dated by the Project Director. Alternate signatures will not be accepted without prior approval. Please plan accordingly.

**Please contact Jennifer Ballagh, VALE Administrator, at 970-244-1737 or [jennifer.ballagh@mesacounty.us](mailto:jennifer.ballagh@mesacounty.us) if you have any questions.**