



NEIGHBORHOOD GRANT PROGRESS REPORT

This report covers from: ___/___/___ through: ___/___/___ Date Submitted: _____

Group Name: _____

Project Name: _____

Report Submitted by: _____ Phone: _____

Email: _____

Instructions: The purpose of this report is to gather periodic updates about the progress of your project. Please answer all the questions completely. Your responses help us to improve our relationship with you and other neighborhood groups. Feel free to use additional paper or the back of this form to respond.

- **What were your goals for the last four months?** *Look back on your last progress report.*

Goal 1:

Accomplished? ___ **yes** ___ **no**

Goal 2:

Accomplished? ___ **yes** ___ **no**

Goal 3:

Accomplished? ___ **yes** ___ **no**



- **List any additional accomplishments or highlights (e.g., media coverage, new volunteers, something unexpected)?**

1.

2.

3.

- **Have volunteers increased in number or time committed?** _____ yes _____ no
- **Have you intentionally engaged participants of all ages?** _____ yes _____ no
- **Have you intentionally involved renters and home owners?** _____ yes _____ no
- **How satisfied are you with what you have accomplished during the last four months?**
___ very satisfied ___ somewhat satisfied ___ not at all satisfied

Explain:

- **Are you able to see any physical changes to the environment or social changes to the community due to this project? If so, what changes?**

- **What partnerships or collaborations have been generated through the project (with schools, businesses, agencies, etc.)? How have these new partners helped the project?**

Name of partner/collaborator _____ How they helped _____.

- **What obstacles or barriers did your group encounter and how did you overcome them this period (e.g., volunteers, materials, finances, follow-through)?**

- **What are your goals for the next four months?**

Goal 1:

Goal 2:

Goal 3:

- **What observations can you make about the skills, abilities, or knowledge the group members have acquired during the past four months?**

- **What help or support has PRO Neighborhoods staff provided (other than grant funds)? What are some of the needs that PRO Neighborhoods has not been able to fulfill?**

GRANT MONEY	
Original grant amount \$ _____	
A. How much of your grant was left after the last progress report? (Item C from last report)	\$
B. How much have you spent during the past four months? (total money spent, from previous page of this report)	- \$
C. How much of your grant do you have left now? (BALANCE – subtract B from A)	= \$

PRO Neighborhoods is interested in knowing what resources, both cash and in-kind, you have brought in to support your project. Please answer the following questions with as much detail as possible.

NON-CASH DONATIONS RECEIVED IN THE LAST FOUR MONTHS (food, materials, time, etc.)		
What you received	Who contributed it?	How much is it worth?
		+ \$
		+ \$
		+ \$
		+ \$
		+ \$
		+ \$
		+ \$
	Total	= \$

CASH DONATIONS RECEIVED THE LAST FOUR MONTHS	
Who contributed?	Amount contributed?
	+ \$
	+ \$
	+ \$
	+ \$
	+ \$
	+ \$
	+ \$
	Total = \$

If you wish to propose a budget change to PRO Neighborhoods, please complete the Budget Change Request form (available from www.proneighborhoods.org or call 882-5885). NOTE: Until you receive a signed approval from a PRO Neighborhoods staff person, please do not proceed with the changed budget.