

Quarterly Narrative Progress Report

Unemployment Insurance ~~Employment and Training~~ Supplemental Budget

Request Activities

SBR General Information

State Name:	Grant Number:	Report Quarter Ending:	Date of Submission:

Project Name:	UIPL/Solicitation Number:

Project Contact Information

Name:	Agency:
Title	Address:
Phone:	City:
E-Mail:	State:
	Zip Code:

Project Report

A. Summary of Project

Please limit your response to 1000 characters or less.

This section is an executive summary of the project. Each funded ~~SBR~~ project will have its own separate quarterly progress report (ETA 9178) through the quarter the project ends. Use this section to provide a short summary of the project's purpose. This summary should only change during the life of the grant if the state has received an approved modification to the grant Statement of Work.

B. Timeline for Grant Activities and Milestones or Deliverables

Please limit your response to 1000 characters or less.

Use this section to provide the timelines for and the progress in completing grant activities, key milestones, and deliverables for this quarter. Use the timeline in the grant's statement of work to identify all major program activities for the entire life of the grant. The timeline will paint a picture of project flow that includes start and end dates, schedule of activities, and projected outcomes. In order to reap the most benefit from the timeline, it is important that it be updated each quarter noting the actual date of completion as each activity is accomplished. Items to incorporate in the timeline include: project goals, milestones, special events, important deadlines and deliverables.

C. Project Implementation and Funding Status

Please limit your response to 1000 characters or less.

Use this section to provide a description of the implementation of key activities in line with the grant's Statement of Work for the current quarter. Place an 'X' in one of the four check-boxes provided below to provide an assessment of implementation progress. The assessment should be supported by the status narrative noting if the project is on schedule, behind schedule, ahead of schedule, or complete this quarter. In addition, please provide the funding status for this project for the end of the quarter, including the total project funding, total obligated, funding balance, and time remaining to expend funds/expenditure target.

State Self-Assessment:	On Schedule	Behind Schedule	Ahead of Schedule	Complete this Quarter
Total Project Funding	Total Obligated	Funding Balance	Expenditure Target	

D. Project Challenges, Risk Mitigation Efforts/Modification Requests, and Technical Assistance Needs

Please limit your response to 1500 characters or less.

Use this section to summarize any significant challenges to project implementation encountered during the quarter, and describe any risk mitigation efforts or actions taken to address the identified challenges. In addition, a status update shall be provided on the resolution of challenges identified in previous quarters. This section should also include any questions you have for DOL and note any identified needs for technical assistance from DOL or others. The narrative should also indicate whether the grantee is

requesting a modification to any project strategies and how the modification request changes the original project proposal. If a modification has been requested, the narrative should also indicate the status of the modification request. If states have nothing to report, that should be specified.

E. Best Practices, Promising New Strategies and Success Stories

Please limit your response to 1000 characters or less.

Use this section to describe promising approaches, innovative processes, or grant success stories. States may also describe any lessons learned and how those lessons learned will be implemented. Throughout the implementation of the project, states may discover new strategies that emerge as a result of data-driven continuous improvement. As progress is made with a new and promising strategy, or as data is gathered to support it, states should document the progress and data each quarter. If states have nothing to report, that should be specified.

F. Additional Outcome Information

Please limit your response to 1000 characters or less.

This section allows states to report any grant-specific outcomes not captured in other sections of the quarterly narrative progress report, including, but not limited to, any specific outcomes included in the statement of work.

Certification

Name of Grantee Certifying Official:

Phone:

E-Mail Address:

This reporting requirement is approved under the Paperwork Reduction Act of 1995, OMB Control No. 1205-0517, expiring 05/31/2018. Persons are not required to respond to this collection of information unless it displays a currently valid OMB number. Public reporting burden for this collection of information is estimated to average ~~10 hours for the first two quarterly reports and an average of 5 hours for future quarterly reports~~, including time for reviewing instructions, searching existing data sources, gathering and reviewing the collection of information. The reason for the collection of information is general program oversight, evaluation and performance assessment. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden, to the U. S. Department of Labor, Employment and Training Administration, Office of Performance and Technology, 200 Constitution Avenue, NW, Room S-5206, Washington, D.C. 20210.