

Quarterly Grant Performance Report

Grant reports are due quarterly. Please fill out ALL sections of the following reporting form and email to DNR.CMP@illinois.gov by the due date.

Reporting Period: Year: _____ Jan 1 - Mar 31 (Due April 15) Apr 1 - June 30 (Due July 15)
 Jul 1 - Sept 30 (Due Oct 15) Oct 1 - Dec 31 (Due Jan 15)

Grant Number: _____ Tax ID/(FEIN): _____

Project Name: _____

Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Project Contact Name: _____

Telephone #: _____ Email Address: _____

Certification: *I hereby certify that this report is an accurate and complete representation of the completed work. I further certify that the work is in compliance with the provisions of the signed Grant Agreement, including amendments thereto, with the Illinois Department of Natural Resources.*

Grantee Signature Date

Name (please print) Title

IDNR USE ONLY

IDNR Project Manager's Review and Approval: *To the best of my knowledge, the information provided herein is accurate, complete, and in compliance with the terms and conditions of the grant agreement. I therefore approve the performance report.*

IDNR Signature Date

Name (please print) Title

1. What are the project accomplishments for the reporting period? Please provide a description of activities and methods used to reach your project accomplishments. The description should be detailed enough to give us a good understanding of progress that has been made on your grant. Use only the space provided.

2. Status of key project tasks. Please include all tasks, including those that have not been started on. We compare between quarters, so please look back at your last report and keep wording consistent.

	TASK Name (or VERY brief description- use only space provided)	Percent Complete				
		0%	25%	50%	75%	100%
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

3. Have there been any problems with grant progress? Yes No
Is the project on track for completion within the timeframe of the grant? Yes No
Are there any planned changes to the line items in the budget or match? Yes No
Do you currently anticipate that you will spend your entire grant? Yes No
Has there been a change to the project lead/ principal investigator? Yes No

If there are any issues, problems, or changes, please explain.

4. What work is projected for the next reporting period?

Performance Metrics- **To avoid double-counting, only include data from this reporting period.**

1. Number of acres restored as part of this grant: _____
2. Number of public access sites enhanced as part of this grant: _____
3. Number of people who received education or technical training through grant on the following topics.

	Education	Training
Coastal Habitat:	_____	_____
Coastal Hazards:	_____	_____
Public Access:	_____	_____
Government Coordination:	_____	_____
Coastal Dependent Uses:	_____	_____
Coastal Community Development:	_____	_____

4. Did this project accomplish any of the following this reporting period? If yes, specify the name of the municipality/ies where the project was completed. Only include actions that have been completed.

Reduce future damage from coastal storms:

Increase public awareness of coastal hazards such as storms or shoreline erosion:

Develop or update a sustainable development plan:

Develop or update a waterfront development plan:

Develop or update a runoff management plan:

Implement an on-the-ground sustainable development project:

Implement an on-the-ground waterfront development project:

Implement an on-the-ground runoff management project:
