



**Community Chest of New Britain and Berlin
Interim Report Guidelines
Program and Operating Grants**

Agency Name: _____ Date _____

Person Submitting the Report: _____ Phone _____ Email: _____

Name of the project funded: _____ Grant Amount: _____

1. Please state the results you planned to achieve with this project:

2. At present, are you on course to achieve your stated result with the time and money remaining in this project? _____yes _____ no _____ unsure

If yes, please list concrete evidence to support your assessment:

If no, please list what hindered the project and the changes you will make or solutions you will implement to get back on track:

If unsure, please list and explain the obstacles to be overcome or changes/adjustments that need to be made to ensure successful completion of the project:

3. Are those you are actually serving so far different in a significant way from those you said you would be serving in your proposal? If so, what is the difference?

4. Please note here the amount you have actually spent as of this interim report: