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| **NGO Service Development Grant Program**  **PROGRESS REPORT** |

Funding recipients are required to submit Progress, Final and Statement of Expenditure under the NGO Service Development Grant Agreement. These reports are a condition of receiving NGO Service Development Grant program funds for Categories 2 and 3.

The information provided will be collated and used to monitor the progress of projects, for publicity purposes and to report on program outcomes.

For questions, please contact Jo Penhallurick, NADA Sector Development Grants Coordinator via email at [sectordevelopment@nada.org.au](mailto:sectordevelopment@nada.org.au).

**The NGO Service Development Grant Program Progress Report is due to** [**sectordevelopment@nada.org.au**](mailto:sectordevelopment@nada.org.au) **no later than 30th of June for projects continuing beyond June 2024.**

If the project funded by the NGO Service Development Grants has been completed before the 30th of June 2024, please fill out a FINAL REPORT only.

**ORGANISATIONAL DETAILS**

|  |  |
| --- | --- |
| **Organisation Name** | Click here to enter text. |
| **Program / Service Name/s** | Click here to enter text. |
| **Service location/s where funding is being utilised**  (If multiple service sites, list multiple locations) | Click here to enter text. |

**MAIN CONTACT PERSON**

|  |  |
| --- | --- |
| **Name** | Click here to enter text. |
| **Position** | Click here to enter text. |
| **Telephone** | Click here to enter text. |
| **Email** | Click here to enter text. |

**GRANT FUNDING ALLOCATED**

|  |  |
| --- | --- |
| **Total funding allocated** (excluding GST) | **$** |

**PROJECT UPDATE**

**Progress and achievements**

Provide a brief overview of the project’s progress and achievements to date against each of the proposed project outcomes

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| --- |
| Click here to enter text. |

(maximum 200 words)

**Project timeline update**

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| **Project commenced:** Click here to enter text.  **Project status:** Click here to enter text.  (e.g. ongoing / completed)  **Project expected end date:** Click here to enter text. |

**Impacts to the project plan**

Provide details of any issues encountered throughout implementation of the project including changes to the original proposed scope, delays in implementation and any other concerns that may impact ability to complete the project by November 2024.

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| Click here to enter text. |

(maximum 200 words)

**BUDGET UPDATE**

Outline the project budget using the table provided.

|  |  |  |
| --- | --- | --- |
| **Expenditure items (funds spent)** | **Service site requested for (if applicable)** | **Funding utilised**  (GST exclusive) |
|  | | |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| **Expenditure item (remaining funds)** | **Service site requested for (if applicable)** | **Funding expected**  (GST exclusive) |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| Click here to enter text. | Click here to enter text. | **$** |
| **TOTAL** |  | **$** |

(Insert additional rows as required for individual budget line items)

**CERTIFICATION**

In submitting this report, I certify that the above information is true and correct.

**Authorised by Chief Executive or nominated delegate**

|  |  |
| --- | --- |
| Name and position |  |
| Signature |  |
| Date |  |