

Lake Champlain Basin Program

Quarterly Report

Date:

Organization Name: _____
Project Name: _____
NEI Job Cost Code: _____
Project Code: _____
Final Report Due Date (per your workplan): _____

Contact Information:

Name of your organization's contact person: _____
Organizational affiliation: _____
Address: _____
Telephone number: _____
Email: _____

Summary of Activities:

Provide a paragraph describing all work completed during the quarter. You may also use a bulleted list.

Challenges Encountered:

Provide a paragraph explaining challenges encountered in completion of the above work (if any), as well as explanations for tasks not completed in accordance with the workplan timeline for this quarter.

Work Anticipated Next Quarter:

Provide a paragraph describing the work your organization plans to complete within the next quarter of activity.

Project Status:

Explain any discrepancies between work completed and the projected workplan timeline and how those discrepancies will be addressed before project completion.

Quality Assurance Progress (for projects with approved QAPPs only):

Please explain your progress on quality control tasks described in your QAPP. Were quality control measures taken? Was your project in compliance? If not, what actions were performed?