

MICRO-GRANTS FOR FOOD SECURITY PROGRAM
PERFORMANCE PROGRESS REPORT

Report Type

This Performance Progress Report (PPR) must illustrate the progress made toward project completion. Please fill out as completely as possible. Fillable form fields have character limits within brackets.

Recipient Type

CONTACT INFORMATION

Recipient Name or Organization

Phone Number

Mailing Address

Email

PROJECT INFORMATION

Project Type

Project Title (100 char.)

Contract Number

Project Address

Project Start Date

Project End Date

PROGRESS

Was the project completed?

☐

YES

☐

NO

SUMMARY

Provide a summary of the progress made. (2,000 char.)

OUTCOMES AND INDICATORS

OUTCOME 1: ACTIVITY TYPE (REQUIRED)

List each activity/step that you proposed to complete when you applied. Check “Yes” if the activity was completed and check “No” if the activity was not completed. Refer to your application to complete this section.

Activity (200 char.)	Completed?	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

OUTCOME 2: QUANTITY OF FOOD GROWN (REQUIRED)

Complete the indicator boxes below by entering all applicable product types, units of measurement, and quantity. If a unit of measurement is not available, please convert to closest unit of measurement (e.g. “Bunches” → “Ounces” or “Pounds”)

Product	Unit of Measurement	Quantity (How much? Whole numbers only)

OUTCOME 3: NUMBER OF BENEFICIARIES (REQUIRED)

Please provide the total number of individuals fed, educated, or impacted

Describe the project’s direct and/or indirect beneficiaries and how they were impacted.

NARRATIVE

CHALLENGES AND DEVELOPMENTS

Please provide any challenges or positive developments that occurred during this reporting period and any corrective actions taken to address these issues. For positive developments, you may put "N/A" under Corrective Actions.

Challenge or Development (400 char.)		Corrective Actions
1		
2		
3		
4		
5		

LESSONS LEARNED

Please provide recommendations or advice that others may use to improve their performance in implementing similar projects within the 1-year timeline.

Lesson Learned (400 char.)		Related To (Fill in applicable)	
1		Outcome #	Challenge/ Development #
2		Outcome #	Challenge/ Development #
3		Outcome #	Challenge/ Development #
4		Outcome #	Challenge/ Development #
5		Outcome #	Challenge/ Development #

PROGRESS REPORT ATTACHMENTS DESCRIPTIONS

Please attach a copy of the tracking document(s) and any additional document(s) used to collect project information and support your project results.

Examples: Tracking Logs, Photos, Videos, Success Stories, Receipts

Document Name (100 char.)	Document Description (100 char.)

SUBMISSION OF DOCUMENTATION (E.G. PHOTOS, VIDEO, RECEIPTS) ARE MANDATORY AND MUST BE EMAILED TO [HDOA.MD.FY23.MICROGRANTS@HAWAII.GOV](mailto:hdoa.md.fy23.microgrants@hawaii.gov)

By checking this box below, I understand that submittal of documentation is necessary to complete my project and I agree to email photos and/or videos and receipts related to this project to hdoa.md.fy23.microgrants@hawaii.gov

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By signing below, I verify that I have fully read and completed this final report form in its entirety.

Signature:

Email: