**APPENDIX E**

**GRANT-FUNDED PROJECT
Quarterly Critical Review**

**INSTRUCTIONS:**

* This review is conducted by the Grants Coordinator.
* The Quarterly Critical Review is conducted in the next quarter following the date of the grant award and is used in the review and evaluation of a Grant-Funded Project for the purpose of identifying any problems or issues that may occur throughout the life of the Grant.
* Recommended Action to be taken to resolve or correct any identified problems must be specifically described in #9 of this form, along with time frame for completion and party responsible for taking corrective action.
1. **GRANT: CONTRACT: FOUNDATION: MOU:
REVIEW DATE:**
2. **GRANTOR:
GRANT PROJECT TITLE:
CONTACT NAME: CONTACT PHONE:**
3. **GRANT PROJECT ADMINISTRATOR:**
4. **GRANT PERIOD:** Start Date: End Date:
5. **FINANCIAL:**

Amount Awarded:

Charge Center:

Budget Completed: Yes No

Percent of Grant Award Expended:

Percent of Funds Reimbursed:

Comments:

1. **STATUS IN ACHIEVING OPERATING PLAN GOALS, OBJECTIVES & ACTIVITIES:**
Describe (Use additional pages, as needed)
2. **STATUS IN MEETING COMPLIANCE REQUIREMENTS:**Describe (Use additional pages, as needed)
3. **STATUS IN MEETING REPORTING AND EVALUATION REQUIREMENTS:**Describe (Use additional pages, as needed)
4. **GRANTS COORDINATOR FINDINGS & RECOMMENDATIONS:**
(Be specific and detailed in describing problems/issues and corrective actions. Use additional pages, as needed)

**Prepared by:
GRANTS COORDINATOR Signature Date**

**Reviewed by:
GRANT PROJECT ADMINISTRATOR Signature Date**

**Reviewed by:
RESPECTIVE VICE PRESIDENT Signature Date**

**CC: President**

 **Vice President of Administrative Services**