**BROWNFIELDS JOB TRAINING**

**COOPERATIVE AGREEMENT**

**QUARTERLY PROGRESS REPORT**

**Cooperative Agreement Number:** *(insert brownfields cooperative agreement number)*

**Reporting Period:** *(insert timeframe)*

**Date Submitted:** *(Reports are due to be submitted within 30 days of the close of each Federal fiscal quarter)*

**Prepared for:**

*(name, office/department, and address of grantee)*

**Prepared by:**

*(name, address, and phone number of person or entity administering the grant)*

**Submitted to:**

|  |  |
| --- | --- |
| Your [Project Officer](http://www.epa.gov/region1/brownfields/contacts.html) EPA New England, Region 1 5 Post Office Square, Suite 100 Mail Code (Go to [Contacts](http://www.epa.gov/region1/brownfields/contacts.html) page to find code) Boston, MA 02109-3912  (Go to [Contacts](http://www.epa.gov/region1/brownfields/contacts.html) page to find email address) |  |

**1. PROJECT PROGRESS**

***Progress reported in this section will clearly identify only those activities performed during the reporting period that were undertaken with EPA funds, and will relate EPA-funded activities to the objectives and milestones agreed upon in the grant work plan.***

**1.1 Status of Activities During the Reporting Period**

Describe the work accomplished during the reporting period. Activities (tasks, subtasks, outputs, objectives, milestones, etc.) agreed upon in the grant work plan should be listed here in the order in which they appear in the workplan. The narrative should include the date each class started, the number of participants that started the class, the number of participants that dropped out (i.e., personal problems, learning difficulty, etc.), the number of participants completing the class, the placement achieved for each participant of the class, and salary.

Specify that the participants are recruited from neighborhoods where the brownfields sites are located. Summarize the training courses that have been conducted including the innovative technology course(s). Discuss your training plans on how innovative and alternative technologies will be covered.

Please also explain in this section any delays or other problems (if any) encountered during this reporting period for each activity, and describe the corrective measures that are planned. Also mention what kind of assistance (training or technical support) is needed to address these problems in the future.

**1.2 Activities Anticipated in Next Reporting Period**

Describe activities that are being planned for the next reporting period (i.e., recruitment, job placement, special guest speakers, field trips, etc.).

**1.3 Modifications to the Workplan**

Include a description of any modifications to the work plan that were approved during the reporting period. Also mention in this section modifications to the work plan that will be proposed in the next reporting period. If none, please state so. (Please note that mentioning a proposed modification or item requiring approval in the quarterly progress report does not satisfy the requirement for submitting a request to EPA).

**1.4 Schedule Summary**

Discuss the progress made on various grant activities as compared to the proposed schedule in the work plan. Explain significant discrepancies. Include if appropriate, a revised schedule for submission of any deliverables or other work products identified in the work plan.

1. **BUDGET SUMMARY**

Include Tables with details about how much was spent by Task and Object Class. Table 1 summarizes the expenses for the reporting period by task, Table 2 summarizes the overall expenses for the project.

**Table 1: Summary of Costs Incurred this Quarter**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Object Class** | **Task 1** | **Task 2** | **Task 3** | **Task 4** | **Total Quarterly Expenses** |
| **Personnel** |  |  |  |  |  |
| **Fringe Benefits** |  |  |  |  |  |
| **Travel** |  |  |  |  |  |
| **Equipment** |  |  |  |  |  |
| **Supplies** |  |  |  |  |  |
| **Contractual** |  |  |  |  |  |
| **Other** |  |  |  |  |  |
| **Total** |  |  |  |  |  |

**Table 2: Summary of Costs Incurred for Project**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Object Class** | **Budgeted Amount** | **Previously Expended** | **Expenses this Quarter** | **Totals** |
| **Personnel** |  |  |  |  |
| **Fringe Benefits** |  |  |  |  |
| **Travel** |  |  |  |  |
| **Equipment** |  |  |  |  |
| **Supplies** |  |  |  |  |
| **Contractual** |  |  |  |  |
| **Other** |  |  |  |  |
| **Totals** |  |  |  |  |

**3. MINIMUM REPORTING REQUIREMENTS**

In addition to describing the work accomplished during the reporting period, recipients are required to provide information on the six ***Key Measures*** for the Brownfields Job Training Grants. These six Key Measures are defined in **OMB Circular 2030-0020** (Note: A copy of this Circular can be obtained from your EPA Project Officer). **Attachment 1** can be used to report on these Key Measures.

**OMB Circular 2030-0020** also describes suggestions for ***Voluntary Supplemental Information*** that can be provided in your Quarterly Progress Report. **Attachment 2** can be used to report on the Voluntary Supplemental Information.

**BROWNFIELDS JOB TRAINING GRANT PROFILE**

**ATTACHMENT** **1** **(REQUIRED)**

(Provide the information requested below for the grant profile. This is to be prepared **quarterly** by the Project Manager, attached to the Quarterly Report, and sent to the Brownfields Data Managers at Region 1 and EPA Headquarters).

**Grant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_**Reporting Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Zone (Federal EC/EZ, State or Local): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Form Filled Out:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CUMULATIVE**   **THIS QUARTER TO DATE**

|  |  |  |  |
| --- | --- | --- | --- |
| **JT1** | Number of Participants Entered in Training |  |  |
| **JT2** | Number of Participants Completing Training |  |  |
| **JT3** | Number of Participants Obtaining Employment |  |  |
| **JT4** | Average Hourly Wage of Participants Obtaining Employment |  |  |
| **JT5** | Total number of Brownfields-related Partnerships with other Organizations Including the following: |  |  |
| **JT5A** | •Number of Partnerships with other Federal Agencies |  |  |
| **JT5B** | •Number of Partnerships with State and tribal Government Agencies |  |  |
| **JT5C** | •Number of Partnerships with Local Government Agencies |  |  |
| **JT5D** | •Number of Partnerships with Private Entities and Non-governmental Organizations |  |  |
| **JT6** | Information on Total Leveraged Funds for Training Grants |  |  |
| **JT6A** | •Funding Committed from other Federal Agencies |  |  |
| **JT6B** | •Funding Received from State Government Agencies |  |  |
| **JT6C** | •Funding Received from Local Government Agencies |  |  |
| **JT6D** | •Funding Received from Private Entities and Non- governmental Organizations |  |  |

***Job Training Grant recipients are encouraged to (voluntarily) provide information on the opposite page.***

**VOLUNTARY SUPPLEMENTAL INFORMATION FOR BROWNFIELDS JOB TRAINING GRANTS**

**ATTACHMENT** **2 (VOLUNTARILY)**

* Provide demographic information (gender, age, ethnicity, etc.) on participants entered in training.
* Provide demographic information (gender, age, ethnicity, etc.) on the participants, and a description of their training.
* Provide information on the types of jobs obtained.
* Average Hourly Wage of Participants Obtaining Employment. ***(No additional voluntary information*** ***required on this key measure)***
* Provide a listing of the committed partners involved, including organizational names, addresses, contact names, and a description of the partnerships.
* Provide a listing of the other organizations involved, including the funding amounts and a description.

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