

Roy and Ida Eagle Foundation

Mid-Year Progress Report

Date:

Agency Name:

Program/Project Name:

Contact Information:

Name: _____

Title: _____

Phone: _____ Email: _____

1) Program/Project Description:

2) Please share with us any challenges your organization is facing that may affect your ability to accomplish your objectives:

3) Please provide an update on your program's accomplishments related to the activities supported by the grant:

4) Please provide us with any additional information you would like to share with us: