



PimaCountyCommunityCollegeDistrict

PROGRAM NARRATIVE and/or FINANCIAL REVIEW and APPROVAL FORM

This form should be completed when submitting a grant-funded program performance and/or financial reports as required by the grant funding agency. Please SUBMIT TO: Grants One-Stop Center at least 5 working days before the submission deadline.

Program Title: \_\_\_\_\_
Funding Agency: \_\_\_\_\_

Report Type:

[ ] Programmatic [ ] Financial

Grant Award #: \_\_\_\_\_ Fund #: \_\_\_\_\_

Reporting Period: \_\_\_\_\_ To \_\_\_\_\_
Method of Submittal: [ ] Postmark [ ] Receipt [ ] Email [ ] Electronically Required copies: \_\_\_\_\_
DUE TO GOSC: \_\_\_\_\_ DUE to Funder: \_\_\_\_\_
ADDRESS to Submit the report to:
Name: \_\_\_\_\_ E-mail: \_\_\_\_\_
Address: \_\_\_\_\_ Fax: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Project Director/Program Manager (PD/PM): \_\_\_\_\_ Ext: \_\_\_\_\_ Campus: \_\_\_\_\_

REPORT REVIEW and APPROVAL

I have reviewed the attached report and believe it to be consistent with the program performance and/or financial activities being reported, and that activities were carried out in conformance with funding agency terms and conditions of the grant, and in accordance with campus, and College policies.

[ ] Campus [ ] District Signature Date
PD/PM PD/PM
VP/Designee Asst. Vice Chancellor
President Vice Chancellor/Exec. VC

COMPLIANCE REVIEW

I have reviewed the attached report and found it to be in compliance with the terms and conditions of the funding agency regulations under which this grant is awarded, and is consistent with the policies of the College.

Advanced Grants Analyst Date Advanced Fiscal Analyst Date
Executive Director, Grants One-Stop Center Date