**Quarterly Progress Report**

*Please complete all sections in blue*

|  |  |
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| **For Quarter Ending :** | [ ]  **1st Quarter** [ ]  **2nd Quarter** [ ]  **3rd Quarter** [ ]  **4th Quarter** |
| **Date Submitted:** |  |

|  |  |
| --- | --- |
| **Project Title:** |  |
| **Research Agency:** |  |
| **Principal Investigator(s):** |  |
| **State Project Number:** | RES |
| **Project Start Date:** |  | **Total Project Budget****(Contract Funds Approved):** |  |
| **Project Completion Date:** |  | **Budget Spent to Date:** |  |
| **% Funds Expended:** |  | **% Work Done:** |  | **% Time Expired:** |  |

**Project Schedule Status (select one):**

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| --- | --- | --- | --- |
| [ ] On Schedule  | [ ] On Revised Schedule  | [ ] Ahead of Schedule | [ ] Behind Schedule |

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| --- | --- | --- | --- |
| **Task** | **% of Contract Task Total:** | **% of Task this quarter:** | **% of Task to date:** |
| Task 1 |  | 30% | 100% | 15%/30% |
| Task 2 |  | 30% |  |  |
| Task 3 |  | 30% |  |  |
| Task 4 |  | 10% |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| TOTAL | 100 % | 100% |  |
| To complete this section, please modify **% of Task this quarter** and **% of Task to date.** For example, research for this quarter may only entail work on Task 1. In the **% of Task this quarter** column, **100%** would be entered into Task 1. The column **% of Task to date** would also be adjusted to reflect the percentage of Task 1 that had been completed this quarter as a percentage of the amount budgeted for Task 1 in the **% of Contract Task Total** column. The column **% of Contract Task Total** will remain the same at all times because all tasks will initially be given a percentage in the contract and will total 100%. |

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| **Progress this quarter by task (includes contract status, meetings, significant progress, training, travel, work plan status, etc.):** |
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| **Proposed activities next quarter by task (anticipated work):** |
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| **List of deliverables (significant results) provided in this quarter by task and date:** |
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| **Progress on potential implementation:** |
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| **Problems and recommended solutions (if applicable):** Describe any problems encountered or anticipated that might affect the completion of the project within the time, scope, and fiscal constraints set forth in the contract, along with recommended solutions to those problems. **NOTING DIFFICULTIES IN THIS SECTION DOES NOT CONSTITUTE A REQUEST TO MODIFY THE PROJECT.** Requests for additional time, money, or scope revisions must be submitted in a separate letter to the Research Office. |
|  |

**FOR INTERNAL PURPOSES ONLY**

|  |  |
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| **TDOT Date Received:** |  |
| **Approvals:** | **Signatures:** | **Date:** |
| **TDOT Lead Staff:** |  |  |
| **Research Office Supervisor:** |  |  |
| **Director, TDOT Long Range Planning:** |  |  |