|  |  |
| --- | --- |
|  | **Grantee Name (To Enter)****PRF Grant #: (To Enter)** **Date: (To Enter)**  |

 ❑ ANNUAL progress REport ❑ FINAL progress rEPORT

# REPORT INSRUCTIONS:

1. **Please use your grant proposal to copy and paste each aim and milestone**
2. **Milestones (Each milestone should be defined and addressed in bullet-point format)**
3. **Address problems / pitfalls**
4. **Advise of any change of direction in your project (PRF Medical Research Committee must be informed and approve prior to change)**
5. **Plans for the coming year (if annual/interim report)**
6. **Length limit (1-2 pages)**

# AIM 1 / milestones

**Aim:**

**Milestones:**

* **(Enter here)**

**Problems/pitfalls:**

**Plans for coming year (if annual report):**

# AIM 2 / milestones

**Aim:**

**Milestones:**

* **(Enter here)**

**Problems/pitfalls:**

**Plans for coming year (if annual report):**

# AIM 3 / milestones (iF APPLICABLE)

**Aim:**

**Milestones:**

* **(Enter here)**

**Problems/pitfalls:**

**Plans for coming year (if annual report):**