



Howard County Department of Community Resources & Services
Community Service Partnership (CSP) Human Service Grants
ONE-TIME GRANT – Narrative Report

Organization:

Grant Year:

Quarter:

CSP Grant Report

1. Was your Project completed during this reporting period?
2. Please provide a status update summarizing the progress made on your Project during this reporting period. In the 2nd, 3rd, and 4th quarter reports, please include an update on the anticipated activities and expenditures outlined in Question 5 of last quarter's report. If no progress was made, please explain why.
3. Have you experienced any significant changes to the proposed timeline or budget for the Project during this reporting period? If yes, please explain.

