



# **MICHIGAN TRAUMA SYSTEM DEVELOPMENT TRAUMA INFRASTRUCTURE *PROJECT INTERIM REPORT***

**DUE DATE: MARCH 31, 2017**

**Project Title:**

**Project Contact Name:**

**Project Contact Email:**

**Date:**

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## **Instructions**

1. Please complete all sections of the report. If you are reporting on more than one project, please submit a separate form for each project. Blank copies of the report form can be found at [www.michigan.gov/traumasystem](http://www.michigan.gov/traumasystem).
2. Limit total report to no more than three 8 ½ x 11 pages, single spaced, using a 12 point font.
3. Submit your completed report form electronically to the project liaison assigned to your project (noted in award letter) no later than March 31, 2017.

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## **Narrative**

1. Overview

*Please provide a brief overview of your project.*

2. Project Progress

*Please describe the progress made toward the objectives identified in your application.*

3. Challenges, Barriers, and Lessons Learned

*Were there any significant challenges encountered to date? What barriers, if any, have you encountered? What were some of the strategies used to address those barriers and challenges? Are there any lessons learned to report at this time?*

4. Timeline

*Is the project on track to meet goals and objectives described in your application by August 31, 2017? If not, why?*

5. Additional Comments

*Is there anything else you would like to include in this report?*

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**Budget**

*Describe project costs to date, indicating if costs are on track with estimates submitted with application budget (refer to financial plan in Project Application).*