



Interim Report Form

Call: 2014

**KA2 – KA2 – Cooperation and Innovation
for Good Practices**

Erasmus+

GENERAL INSTRUCTIONS

The declaration on the following page confirms that a process of consultation and approval has been carried out throughout the partnership. If the interim report demonstrates that the coordinator has used at least 70% of the amount of first pre-financing payment, the interim report shall be considered as a request for a further pre-financing payment.

Project Identification

Action Type	Strategic Partnerships for School Education
Project reference number	
Project Title	
Beneficiary Organisation Full Legal Name (Latin characters)	

Project implementation

Please provide a general indication on the overall state of art of the project. Are the initial objectives, planned activities, identified target and expected results being pursued, carried out and reached as initially planned? If no, please summarise the major divergence from the initial project plan and give the reasons for the changes. At this stage do you encounter challenges or problems in implementing the project as planned? If so, under which aspect?

Project Management

How satisfactorily is the ensemble of project partners contributing to the realisation of the project? Has any change in the composition of partners been deemed necessary (as already communicated to the NA), or is it any change planned/requested at this stage?

Which monitoring activities have you carried out so far in order to assess the extent to which your project is reaching its objectives and producing its results? If relevant, how are you measuring the level of success of your project? What measures are being used to handle project risks (e.g. conflict resolution processes, etc.)?

Other Activities

Besides the project management activities already described, which other activities have you carried out using the budget awarded for Project Management and Implementation

Intellectual Outputs

If you have included Intellectual Outputs in your project, please describe what you have achieved so far.

Multiplier Events

If you have organised Multiplier Events in your project, please identify and describe them, also making the connection with the relevant Intellectual Outputs mentioned above.

Learning/Teaching/Training Activities

If you have included learning, teaching or training activities in your project, please describe them. Please indicate the number of accomplished mobilities concerning each activity types (e.g. Short term activities for learners, short term joint staff training events, etc.)

Impact

So far what has been the impact of your project on the participants, participating organisations, target groups and other relevant stakeholders?

Dissemination and Use of Projects' Results

What kind of dissemination activities have you carried out and through which channels? To whom are you disseminating the project results inside and outside your organisation?

Other useful information

If relevant, please provide any other meaningful information deemed necessary to give a comprehensive overview of the current implementation of your project.

Budget

Financial statement on the EU grant

	Total amount
Grant requested to the Erasmus+ Programme (as in your Grant Agreement)	
1st Pre-financing payment: grant already received from the Erasmus+ Programme	
EU grant already used up	
2nd pre-financing payment claimed by the beneficiary to the Erasmus+ Programme	

Checklist

Before submitting your report form to the National Agency, please check that:

- All parts of the interim report that are relevant to your project are filled-in
- The report is signed *[if the NA accepts the report by email, the section "Beneficiary Signature" should be signed, scanned by the beneficiary and attached to the email together with the report]*
- If, in the context of this interim report, you are also forwarding a request for budget amendment, please attach the Budget Amendment Request template, accordingly filled-in.

Beneficiary Signature

I, the undersigned, certify that the information contained in this interim report form and its annexes is accurate and in accordance with the facts.

Place:

Date (dd-mm-yyyy):

Name of the beneficiary organisation:

Name of legal representative:

Signature:

National ID number of the signing person (if requested by the National Agency):

Stamp of the beneficiary organisation (if applicable):