

# Interim report international projects

1. The project

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| Applying organisation | Project number (according to the agreement) |
| Name of project | Country of implementation |
| Amount of funding approved | From which fund? |

2. contact information applying organisation

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| Focal point at applying organisatoin in Sweden |
| Address |
| E-mail to focal point |
| Phone number to focal point |

3. Activity and reporting period

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| --- | --- | --- |
| Start of activity period | End of activity period | Period covered by interim report |

4. Project goals and activities

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| 4.1 Has the project been implemented according to plan?  Yes  No    If no, please describe below the deviations from plan and their possible effect on the project and its achievement of planned goals. This can relate to results framework, budget, risk analysis, target group or other. |
| 4.2 Briefly describe the implemented activities and the achieved goals of the project for the time period covered by the interim report |

5. Cooperation and monitoring

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| 5.1 How is the cooperation between the applying and the implementing organisation evolving? |
| 5.2 Has the project been monitored according to plan?  Yes  No  If no, please describe below the deviations and their possible effects on the project |

6. Financial report

Please annex a budget follow up to the interim report. Also include a narrative analysis to the financial report below. Please note that deviations should be clarified.

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| 6.1 Comment to the financial interim report |
| 6.2 The approved budget needs to be revised  Yes  No  If yes, please annex a revised budget and briefly describe the reasons for revising the budget below |

7. Risk analysis

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| 7.1 The risk analysis from the application needs to be revised  Yes  No  If yes, please annex a revised risk analysis and briefly describe the reasons for revising the analysis below |

8. Annexes

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| **Annex 1:** Financial interim report |
| *If needed* – **Annex 2:** Revised budget |
| *If needed* - **Annex 3:** Revised risk analysis |
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9. Signature

Jag intygar genom att kryssa i denna ruta samt genom min signatur att informationen angiven i delrapporten är korrekt samt att jag har fullmakt att översända rapportering i min organisations namn. Genom undertecknande av denna delrapport är organisationen införstådda med att viss information om sina representanter sparas för att möjliggöra uppföljning och dialog gällande den verksamhet som handläggs av Radiohjälpen.

|  |  |
| --- | --- |
| Place | Date |
| Signature | Title |
| Name in block letters | The interim report is sent to:  Radiohjälpen  105 10 Stockholm |