



Myhre Syndrome Foundation

RESEARCH GRANT FINAL PROGRESS REPORT

Project Title:

Grantee's Name:

Email Address:

Organization:

Report Date:

Reporting Period:

Grant Amount:

Narrative Report: To be completed by Grantee. Please include answers to these questions, preferably in two to three (2-3) pages total.

****Terms may be abbreviated, provided that the complete term is used initially.****

1. What were the original objectives to this study?
2. Which objectives have been accomplished?
3. Please summarize these accomplishments including project advancement indicators.
4. Which objectives have not been met?



5. Describe any problems in meeting these objectives.
6. What are future plans for this project?
7. Please list publications or scientific presentations resulting from this project.
- 8. Please provide a statement written for the general public summarizing the highlights of this report that are suitable for publication on the MSF website, social media platforms and/or in the MSF newsletter.**
9. **Please provide three to four (3-4) photographs** depicting the work accomplished by the Grantee as a result of receiving MSF grant funds. The photographs could be of the Grantee and their collaborators, research being conducted in the lab, etc, and will be considered for use in MSF publications. Please include identifying information and suggested captions.

Financial Report: To be completed by Grantee and/or the Grantee Organization's Fiscal Officer. Amounts must be listed in US \$.

GRANT AMOUNT	\$
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PERSONNEL COSTS

Grantee(s) or Project Leader(s)	\$
Professional and Administrative Staff	\$
Clerical	\$
Outside Consultants (explain)	\$
Other (explain)	\$

1. TOTAL PERSONNEL COSTS	\$
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PROGRAM COSTS

Equipment and Supplies	\$
Travel	\$
Patient Care	\$
Other (explain)	\$



2. TOTAL PROGRAM COSTS

\$

ADMINISTRATIVE COSTS

Office (Supplies, Phone, Postage, Copies, Etc.)

\$

Printing and Publication

\$

Other (explain)

\$

TOTAL ADMINISTRATIVE COSTS

\$

TOTAL PROJECT COSTS (1+2+3)

\$
