

Wisconsin Department of Natural Resources SWIMS Project Summary

General Project Information

Project ID: CAC_2011

Name: Capacity Grants for CAC 100K competitive (non-monitoring)

Type: Great Lakes Restoration Initiative

Subtype: Toxics and Areas of Concern

Status: ACTIVE

Start Date: 5/24/2011

End Date: 6/30/2015

Purpose: 100k annually, competitive grant for internal projects that involve capacity building.

Objective:

Comments:

Outcome:

Study Design:

QA Measures:

People

Name	Role	Status	Start Date	End Date	Organization	Comments
AXNESS, KENDRA A	PROJECT_LEAD	ACTIVE	5/24/2011		Wisconsin DNR	
HRON, STACY L	TEAM_MEMBER	INACTIVE	7/1/2014	7/1/2014	Wisconsin DNR	
PUNKE, EMILY M	TEAM_MEMBER	COMPLETE	4/10/2015	6/21/2023	Wisconsin DNR	
WALZ, KIMBERLY P	PROJECT_LEAD	ACTIVE	5/24/2011	11/10/2016	Wisconsin DNR	
WETTACH, SAMUEL E	DATA_SUPPORT	ACTIVE	8/24/2017		Wisconsin DNR	

Project Statuses

Date	Reported By	Status	Comments
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Project Status Detail

Answer Set: DEFAULT

Question	Answer
1. Reporting Timeframe (Q1) (Q2) (Q3) (Q4):	
2. Amount expended this reporting period:	
3. Subcontracts or subgrants awarded this reporting period:	
4. QAPP (Project Plan) status:	
5. Local services and/or products purchased this reporting period:	
6. Number of jobs created this reporting period:	
7. Work accomplished this reporting period:	
8. Work goals for coming reporting period:	
1. Reporting Timeframe Month/Year to Month/Year (Oct-Mar or Apr-Sept):	
2. Quality Documentation status (respond NA if not required):	
3. Describe work performed during this reporting period relating to the activities from the grant workplan (Previous 6 months):	
4. GLRI Action Plan metric(s) accomplished and numerical progress during this reporting period:	
5. GLRI Action Plan metric(s) accomplished and numerical progress since project start (total complete to date):	
6. Percentage (estimate) of project work completed during this reporting period:	
7. Percentage (estimate) of project work completed since the project start (total complete to date):	
8. Is project work on schedule? If no, please explain.	
9. If a problem was encountered, describe the problem and action(s) taken to correct it.	
10. What work is projected during the next reporting period? (Next 6 months):	
11. Will the project take longer than the approved project period? If so, have you requested an extension in writing to the grant coordinator?	
12. Amount expended this reporting period (can be approximate) If no amount expended, explain why.	
13. Is project invoicing/expenditures up to date? If invoicing is more than 3 months overdue, explain why.	
14. Were any significant changes (>10% of the total project amount) made to the project budget? If so, have you notified the grant coordinator in writing?	

Actions

Action	Detailed Description	Start Date	End Date	Status
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Monitoring Stations

Station ID	Name	Comments
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Assessment Units

WBIC	Segment	Local Name	Official Name
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Lab Account Codes

Account Code	Description	Start Date	End Date
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Forms

Form Code	Form Name
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Methods

Method Code	Method Description
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Fieldwork Events

Start Date	Status	Field ID	Station ID	Station Name
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Documents

Title	Description	Author	Published	Comments
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Budget

Combined Budgets:

Combined WSLH:

Combined Total: \$0.00

Funding

Organization	Source	Type	Amount	Start Date	End Date
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