# MODEL FINAL TECHNICAL REPORT

- This report must be duly completed.
- The report must be signed by the legal representative of the partner.
- The information provided below must correspond to the financial information that appears in the financial report.
- Please complete the report using a typewriter or computer.
- Please expand the paragraphs as necessary.
- The European Commission will reject any incomplete or badly completed reports.
- Unless otherwise specified, the answers to all questions must cover the reporting period as specified in point 1.7.
- The report must include:
  - o A table of contents
  - o A list of acronyms used in the report

#### 1. Description

- **1.1.** Name of person in charge of the grant agreement:
- **1.2.** Name and title of the <u>contact person of the surveys</u>:
- **1.3.** Name of <u>(co-)beneficiary(ies)</u> and affiliated entity(ies) in the Action:
- **1.4.** Framework partnership agreement reference number
- **1.5.** <u>Title</u> of the Action:
- **1.6.** Specific grant agreement reference number:
- **1.7.** Start date and end date of the Action:
- **1.8.** Surveys conducted: <u>country</u> and <u>survey(s)</u>:
- **1.9.** Country(ies) in which the activities take place (if different from 1.8):

# 2. Assessment of implementation of Action activities

# 2.1. Results and Activities

Please give a global overview of the Action's implementation for the whole duration of the project. Include observations on the performance and the achievement of deliveries, and whether the Action has had any unforeseen positive or negative results.

Please use the following table to document the delivery of complete and punctual data for the [name of the survey] survey during the action period:

The data collected during:	cted delivery (provisions o		Actual date and time for data delivery		Reasons for delay or partial delivery (if any)
	Time:	Date:	Time:	Date:	
[month]					
•••					

Please provide a copy of the questionnaire(s) in original language together with any written instructions you give to the respondents and an overview of the sample size (effective, i.e. in terms of completed interviews) over the duration of the action.

ANNEX IV OF THE FRAMEWORK PARTNERSHIP AGREEMENT

Please give reasons for any changes in the planned activity, including in the methodology underlying the surveys, which have arisen and how they have been addressed (if applicable):

Have the activities been monitored/evaluated? If so, how and by whom? Please summarise the results of any possible evaluation:

Please list all contracts (works, supplies, services) awarded for the implementation of the action during the reporting period, giving for each contract the amount, the award procedure followed and the name of the contractor

# 3. Beneficiaries/affiliated entities and other cooperation

- **3.1.** Where applicable, how do you assess the relationship between the (co-) beneficiaries/affiliated entities of this grant agreement (i.e. those having signed the mandate for the Coordinator)? Please provide specific information for each beneficiary/affiliated entity.
- **3.2.** Where applicable, is the above agreement between the signatories to the grant contract to continue? If so, how? If not, why?
- **3.3.** Where applicable, describe your relationship with any other organisations involved in implementing the Action:
  - Associate(s) (if any)
  - Sub-contractor(s) (if any)
- 3.4. Where applicable, outline any links and synergies you have developed with other actions/surveys.
- **3.5.** How do you evaluate cooperation with the services of the European Commission?

### 4. Visibility

How is the visibility of the EU contribution being ensured in the Action (acknowledgement of EU cofunding)?

# 5. Location of records, accounting and supporting documents

Please indicate in a table the location of records, accounting and supporting documents for each beneficiary and affiliated entity entitled to incur costs.

Name of the contact person for the Act	ion:
Signature:	Location:
Date report due:	Date report sent: