

**REPORT ON PROBLEMS ENCOUNTERED AND  
CORRECTIVE MEASURES IDENTIFIED**

**Project Title:** \_\_\_\_\_  
**Project Beneficiary:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Date of *Monitoring*:** \_\_\_\_\_

<b>PROBLEMS / GAPS ENCOUNTERED IN THE IMPLEMENTATION OF THE PROJECT</b>	<b>CORRECTIVE MEASURES IDENTIFIED/ FORMULATED TO ADDRESS THE PROBLEMS</b>

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NAME AND SIGNATURE OF TECHNICAL STAFF