**2019-2020 JPSS Proving Ground Risk Reduction Annual Plan**

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| **2019-2020 Project Information** |

**Project Title:** *(Name of the project)*

**Principal Investigator:***(Or team lead)*

**Team Members:** (*List names of other investigators)*

**Organization:** *(List all development organizations)*

**Stakeholders/Users:** (*List the names of the primary/targeted users you want to engage in the project and the stakeholders.)*

**User Engagement:** *(Please explain how you plan to engage user community throughout the development of your project this year.)*

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| **2019-2020 Project Summary** |

*Elements include project objectives over the entire period of performance. This section should be kept brief to half of one page or less. This may include a bulleted summary. This should not change from quarter to quarter during the performance year.*

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| |  | | --- | | **2019-2020 Annual Milestones** | |

*2019 - 2020 plan, schedule and milestones should build upon project proposals and allocated budget. This plan serves as a project management tool allowing PI’s to track and meet goals. Tasks are activities that need to be accomplished within a defined period of time. Tasks are broken down into milestones with defined start and end dates. A milestone is an action or event marking a significant change or stage in development.  The level of granularity is defined by individual PI. This table should be used for future quarterly reports.*

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| --- | --- | --- | --- |
| **Milestone** | **Planned Completion Date**  *( part of annual plan and should not change from quarter to quarter)* | **Actual Completion** *(To be Filled out for Quarterly reports)* | **Status** *(To be Filled out for Quarterly reports)* |
| **Task 1: *(task, activity or goal)*** | | | |
| ***(Milestone  1)*** |  |  |  |
| ***(Milestone  2)*** |  |  |  |
| ***(Milestone  3)*** |  |  |  |
| **Task 2: *(task, activity or goal)*** | | | |
| ***(Milestone  1)*** |  |  |  |
| ***(Milestone  2)*** |  |  |  |
| ***(Milestone  3)*** |  |  |  |
| **Task 3: *(task, activity or goal)*** | | | |
| ***(Milestone  1)*** |  |  |  |
| ***(Milestone  2)*** |  |  |  |
| ***(Milestone  3)*** |  |  |  |
|  |  |  |  |

*Add rows as needed for all annual tasks and milestones. New milestones which may arise should be added at the end of the table as needed.*

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| **Risks, Dependencies and Issues** |

*This section should include no more than the top five risks and dependencies.  Risks are the bad things that might happen. Dependencies on other projects and resources are considered risks.*

**Risk or Dependency 1:** *(State risk or issue and impact. This should be the same as in the annual plan)*

**Mitigation Plan:** *(This includes options and actions to reduce risks/threats. For issues, this includes plans to address impacts.)*

**Status:** *Use the following table for quarterly reports. Mark appropriate box with an X.*

|  |  |  |  |
| --- | --- | --- | --- |
| **No Change/Open** | **Increasing** | **Decreasing** | **Closed** |
|  |  |  |  |

**Risk or Dependency 2:** *(State risk or issue and impact. This should be the same as in the annual plan)*

**Mitigation Plan:** *(This includes options and actions to reduce risks/threats. For issues, this includes plans to address impacts.)*

**Status:** *Use the following table for quarterly reports. Mark appropriate box with an X.*

|  |  |  |  |
| --- | --- | --- | --- |
| **No Change/Open** | **Increasing** | **Decreasing** | **Closed** |
|  |  |  |  |

**Risk or Dependency 3:** *(State risk or issue and impact. This should be the same as in the annual plan)*

**Mitigation Plan:** *(This includes options and actions to reduce risks/threats. For issues, this includes plans to address impacts.)*

**Status:** *Use the following table for quarterly reports. Mark appropriate box with an X.*

|  |  |  |  |
| --- | --- | --- | --- |
| **No Change/Open** | **Increasing** | **Decreasing** | **Closed** |
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| **Financial Information** |

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| --- | --- | --- | --- | --- |
| **Funding Vehicle** | **Obligating Organization** | **Planned Obligation Month** | **Period of Performance** | **Funding Amount** |
| *List the name/number of the contract, grant, MOU, or other vehicle (e.g., CIMSS, Protech, etc) where the funding will be obligated. Federal equipment should be specified, if applicable.* |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Total FYXX Funding |  | $ |

**Financial POC:** *List name, email address and phone number of POC that should receive the accounting information, must be a NOAA staff member*