**TERMINAL REPORT AND REQUEST FOR EXTENSION OF INSTITUTIONAL STRENGTHENING FUNDING (as modified by decision 74/51)**

20xx to 20xx

Sections 1 to 12 and 15 to be completed by the country concerned prior to transmission to the implementing agency for comments in 14.

1. Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. National implementing agency / ozone unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Implementing agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Institutional strengthening (IS) project phases (approved):

|  |  |  |  |
| --- | --- | --- | --- |
| **Phase** | **Duration****(dd/mm/yy)** | **Multilateral Fund funding****(approved)** | **Multilateral Fund funding****(disbursed)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. a) Reporting period (mm/yy to mm/yy): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

b) Requested (phase funding (US $), and period): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Data reporting:

|  |  |  |  |
| --- | --- | --- | --- |
| **Reporting requirement** | **Reported** | **Year reported** | **Year submitted** |
| yes | no |
| Article 7 |  |  |  |  |
| Country programme implementation |  |  |  |  |

1. Describe the role and position of the National Ozone Unit (NOU) within the national administration, the way its work is supervised and its access to senior decision-makers (this may include cooperation with steering committees, advisory groups or inter-ministerial bodies).

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1. Indicate the total number staff in the NOU:
* How many are paid under the IS? \_\_\_\_\_\_\_\_\_\_\_Full time\_\_\_\_\_\_Half time\_\_\_\_\_\_\_
* How many are paid by the Government? \_\_\_\_\_Full time\_\_\_\_\_\_Half time\_\_\_\_\_\_\_\_
1. Is the unit fully staffed?

|  |  |  |
| --- | --- | --- |
| YES |  | NO |
|  |  |  |

If no, explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please provide details on the status of the implementation of the activities approved from the previous IS phase and planned activities for the requested phase. Please add specific performance indicators.

| **Objectives****(please add as necessary)** | **Activities****in current phase** | **Achievements in current phase****(specify phase/mm/yy)** | **Planned activities in next phase****(specify phase/mm/yy)** | **Expected results for next phase** |
| --- | --- | --- | --- | --- |
| **Objective 1: Adoption/implementation of ODS legislation and regulation to control and monitor ODS consumption** |
| Introduction of licensing and quota system for HCFCs |   |   |   |   |
| Enforcement of control measures to sustain CFC phase out |   |   |   |   |
| Monitoring illegal ODS trade (all ODS) |  |  |  |  |
| Ratification of Amendments to the Montreal Protocol |  |  |  |  |
| **Objective 2: Efficient and timely data collection and reporting** |
| Monitoring customs import/export |   |   |   |   |
| Article 7 data reporting |   |   |   |   |
| Country programme data reporting |   |   |   |   |
| **Objective 3: Consultations and coordination with other national agencies/stakeholders** |
| Steering Committee |   |   |   |   |
| Industry associations |   |   |   |   |
| **Objective 4: Supervision of timely implementation of phase-out activities and reduction in ODS consumption** |
| Terminal phase-out management plan implementation |  |  |  |  |
| HCFC phase-out management plan preparation/implementation |  |   |   |   |
| Project 1 |  |   |   |   |
| Project 2 |   |   |   |   |
| **Objective 5: Awareness raising and information exchange** |
| Information dissemination to key stakeholders |   |   |   |   |
| International Ozone Day |  |  |  |  |
| **Objective 6: Regional cooperation and participation to Montreal Protocol meetings** |
| Regional network participation |  |  |  |  |
| Open-ended Working Group / Meeting of the Parties |  |  |  |  |

1. Financial report:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item of expenditure** | **Budget for current phase****(US $)** | **Disbursement****(for current phase)****(US $)** | **Estimated budget (for requested phase) (US $)** | **Government funding (in kind contribution)****(US $)** |
|  |  | **Actual** | **Obligated** |  | **Current phase** | **Requested phase** |
| Staff (including consultants) |  |  |  |  |  |  |
| Equipment |  |  |  |  |  |  |
| Operational cost (i.e. meetings, consultations, etc.) |  |  |  |  |  |  |
| Public awareness |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |

1. Please evaluate the IS performance in meeting the following indicators:

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Evaluation** | **Comments** |
| Very good | Satisfactory | Poor |  |
| 1. | Effectiveness of import control measures |  |  |  |  |
| 2. | Integration of ozone protection issues into national plans |  |  |  |  |
| 3. | Completion of phase-out projects |  |  |  |  |
| 4. | Efficient data reporting |  |  |  |  |

1. Government endorsement:

|  |  |
| --- | --- |
| Action plan authorized by ***(name)***: |  |
| Signature of authorising authority: | ***(to be signed on hard copy)*** |
| Title: |  |
| Supervising Organization/Agency/Ministry: |  |
| Date: |  |

1. Submission of action plan:

|  |  |
| --- | --- |
| Name of implementing agency: |  |
| Nameof Project Officer: |  |
| Signature of Project Officer: |  |
| Date: |  |
| Comments of the implementing agency: |  |

1. Executive summary: please provide summaries for the information required below in no more than one paragraph each. These paragraphs will be used in documents for the Executive Committee Meeting.
2. Terminal report
3. Plan of action