



# BIOLOGICAL CONTROL OF INVASIVE FOREST PESTS

## FINAL REPORT

**Form Instructions:** When copy and pasting into text fields please paste as "plain text".

### Project Information

	Program	Admin Region	Submission (FY)*	Additional Project ID	Report Type New Proposal (NP)
<b>Project Number:**</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<b>Grants and Agreements Number:</b>	<input type="text"/>				
<b>Project Title:</b>					
<b>Project Status:***</b>	<input type="text"/>		<b>Final Report (FY):</b>	<input type="text"/>	<b>Project Age:</b>

\* The Submission Fiscal Year (FY) refers to the year the original Project Proposal was submitted and selected for funding.

\*\* A unique Project Number is assigned to each project following submission and selection of the New Project Proposal.

\*\*\* If the project is complete but products are pending, please fill out and submit a Progress Report form in lieu of this form.

### Subject Description

<b>Target Invasive Plant:</b>	<input type="text"/>
<b>Common and Scientific Names:</b>	<b>Biological Control Agent(s):</b>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

### Project Overview (from original BCIFP Proposal Form)

Define the project being developed (e.g., what is the technology, goal and objectives, and who will maintain the tool if maintenance is necessary):

Funding Information

Year	Fiscal Year (FY)	Requested BCIFP Funding Received	Non-Federal Match Received	Leveraged Funds	Match Source	Leveraged Source
YEAR 1						
YEAR 2						
YEAR 3						
	TOTAL					

Total Funds Received (All):

Funds not used from previous fiscal year (If there are unused funds, what is the reason for not using them?):

Changes to project scope, objectives, and/or timeline

Were there changes or additions to the original project scope, objectives, or timeline? Yes \_\_\_\_ No \_\_\_\_  
If yes, provide descriptions of any additions, subtractions, alterations including reasons for the changes.

Were the proposed products delivered? Yes \_\_\_\_ No \_\_\_\_ (explain) Partial \_\_\_\_ (explain)

Were the products delivered on time? Yes \_\_\_\_ No \_\_\_\_ (explain) Partial \_\_\_\_ (explain)

### Accomplishments and lessons learned

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Description of tasks accomplished this year and how BCIFP funds were spent (describe primary activities for each year, summarizing key accomplishments from prior year(s), this year's activities):

**Accomplishments to date** (cumulative, from newest to oldest)

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Products:

Publications:

## Technology/method use

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Were the proposed or actual products used? Yes \_\_\_\_ No \_\_\_\_ (explain why the project may not have resulted in a usable product)

Describe how products were used. List user groups, time period and geographic extent outputs used, pest organisms, and resources affected/protected (e.g. wildlife habitat protected, risk reduction for insect disease, etc.):

Did the project produce negative results? Yes \_\_\_\_ (explain) No \_\_\_\_

Can you provide guidance for future development of similar projects? Yes \_\_\_\_ (explain) No \_\_\_\_

Was there anything unique or noteworthy learned from this project? Yes \_\_\_\_ (explain) No \_\_\_\_

## Distribution of outputs

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Describe university and/or research involvement (e.g., list the universities and/or research units involved, and the number and title of graduate thesis written, if applicable):

Describe the dissemination of results. List the number, title and targeted audience of reports written, the number, title and targeted audience of presentations made, and meeting/conference(s) & professional society-sponsor(s):

Describe technology transfer activities (e.g., list number and titles of sessions, number of participants, and participating agencies and organizations):

## Refinement of technology & methods

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Does the project investigate use with or use of other invasive species management tools? Yes \_\_\_\_ (explain) No \_\_\_\_

Do the results of the project improve on existing technologies? Yes \_\_\_\_ (explain) No \_\_\_\_

Did the project result in new technologies? Yes \_\_\_\_ (explain) No \_\_\_\_



Did the project identify new research or technology needs? Yes \_\_\_\_ (explain) No \_\_\_\_

### Product leveraging

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Was the project part of a development sequence? Yes \_\_\_\_ (describe sequence and identify past research project(s) by title)  
No \_\_\_\_

Does the project build-on or is it the result of past research and/or BCIFP project results? Yes \_\_\_\_ (identify past BCIFP project(s) by the project identifier number) No \_\_\_\_

**FHP/BCIFP FHP/FS/Monitor**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Technical Monitor: \_\_\_\_\_

**Principal Investigators**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator:

**Cooperators**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Time commitment: \_\_\_\_\_  
Project Role: \_\_\_\_\_ Funding Coordinator: