Annex 4

PROJECT MONITORING FORM

Project Name:
Project Number:
Implementing Organization:
Country:
REF Project Officer:
Date of monitoring Mission:
Staff and Consultants on the Mission:
Months into implementation:
Reason for Mission:

1. Project development Objectives

Best Practice	*Satisfactory*	*Not Satisfactory*

2. Project Implementation Plan

Best Practice	*Satisfactory*	***Not Satisfactory***

3. Project Stakeholders Involvement

Best Practice	*Satisfactory*	*Not Satisfactory*

4. Project Procurement

Best Practice	*Satisfactory*	*Not Satisfactory*

Contract and purchased Checked:

Comments

5. Project Finances

Best Practice	*Satisfactory*	*Not Satisfactory*

Line items checked:

Comments

6. Project Monitoring and Evaluation

Best Practice	*Satisfactory*	*Not Satisfactory*

7. Overall Assessment

Best Practice	*Satisfactory*	*Not Satisfactory*

8. Follow-up Actions

Actions Required by Implementing Agency

Actions **Time Frame**

Actions by REF

Actions **Time Frame**

Actions by Other Stakeholders

Actions	Time Frame

9. Are there any best practices