



## 2019 Grant Evaluation Report

This Grant Evaluation Report is due one year from the date funds were given. The Report may be submitted earlier shall the project be completed within the year.

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DATE OF REPORT

GRANT CYCLE

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ORGANIZATION NAME

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CONTACT PERSON

TITLE

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ADDRESS

CITY

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PHONE

EMAIL

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PROJECT TITLE

Amount of grant received	Budgeted cost of project	Actual cost of project

**Please respond to the following topics and include your answers with this form.**

1. Brief description of the project for which you received funding as outlined in the original application.
2. What were the actual outcomes? Are there any future plans related to this grant?
3. If there were unexpected results, please share them.
4. Briefly describe the benefits of this contribution to your organization and the community.
5. What parties have benefited?
6. How many lives have been impacted by this grant?
7. How did the grant help you to form new relationships or collaborations? Please list any entities that were active partners.
8. How did your organization recognize this grant? If they have not been previously shared, please submit any stories, photographs or other materials that will help to illustrate this project. Through sharing with us, CFY will have future usage permission of submissions.

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SIGNED

PRINTED NAME

DATE

**Thank you and we look forward to continued partnership!**