



FOREST COUNTY POTAWATOMI
FOUNDATION

Grantee ID	_____
Grant Date	FY _____
Grant Amount	\$ _____
INTERNAL USE ONLY	

FCP FOUNDATION GRANTEE FINAL REPORT

As outlined in the Grant Agreement (#10), you must submit your report (project status) no later than 30 days after the one-year term of the Grant Agreement.

1. Organization: _____

Contact Name: _____

Phone Number: _____ Email Address: _____

2. Grant Purpose:

Please summarize in one or two sentences

3. Status: Completed

4. Please describe your program/project activities:

5. How many people did you plan to serve? _____ **6. What was the actual number served?** _____

7. If there is a difference, please explain why:

8. What degree of impact has your program/project had on your community, families and children you serve?

9. What method(s) of evaluation were used or are being used to measure your success? Can you provide quantifiable and qualitative details?

