North Bend School Foundation

Grant Evaluation Form

School / Organization Name: Date:

Contact Person / Title:

Address:

Phone / Email:

Amount of Grant: Date Received:

Briefly describe the specific objectives and activities outlined in your proposal and the actual results.

Based on your answer above, how would you describe the projects measurable impact so far on the people (students and/or staff) involved?

As you implemented your project, circumstances may have required you to make adjustments to your project. If so, please tell us about it. What specifically led to the change? How did you adapt your project as a result?

Sometime the positive impact of a project is not easy to communicate via measureable results. If this is true of your project, please share with us a story that illustrate the impact of the project.

If you feel your project has been successful, what factors contributed to this? If the project was less successful than you hoped, what do you think contributed to that?

Project evaluation at is best is a tool for learning. How will you use what you have learned from this project to guide your planning and activities in the future?

Signature / Title of Person completing this form: Date:

**\*\*Final receipts are due 90 days after completion of the funded project\*\***

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PO Box 333

North Bend, OR 97459

Email: Kathy5780@charter.net