

Grantee Reporting Form

Organization Name: _____

Contact Person: _____

Phone Number: _____ Email Address: _____

Grant Amount Received: \$ _____

Project Timeline: Start: _____ Completion: _____

1. Grant Experience Feedback

What elements of the grant process did you find most beneficial, and what parts were obstacles?

2. Project Feedback

What aspects of your project went well, and what challenges did you encounter during its implementation?

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3. How did the Grant Meet the Goals and/or Needs of Your Organization?

In what ways did the grant support your organization in achieving its goals and addressing its needs, and what specific impacts have you observed as a result?

4. What Would You Do Differently?

If you could change anything about your approach, the grant process, or the execution of your project, what would it be?

5. Additional Comments and/or Leave a Testimonial

Share any other feedback or insights relevant to this application. If you would like to provide a testimonial regarding your experience with the Foundation, please share it here.

- You may share this publicly.
- Please keep this private.

Signature

Date