

GENERAL SERVICE FOUNDATION

REPORT AND EVALUATION FORM

A. Organization Information

Organization Completing Report:

Address:

Phone Number:

Fax Number:

Email:

Project Name:

GSF Grant Number:

Amount of Grant:

Grant Period:

Date of Report:

Report Due Date:

Reporting by:

Check One: This is a final report This is an interim report

Grant was For (check one:) General Support Project Support

B. Narrative-if possible, please limit to three pages

If reporting for a *general support* grant please:

- Describe significant organizational and programmatic achievements. Were there changes to the organization's goals or staff during the grant cycle?
- Address how you evaluated the effectiveness of the activities, what was learned and how this information will be used

If reporting for a *project grant* please:

- Describe the project's goals and the success you had in meeting them. Were there changes to the original project goals during the grant cycle?
- Address how you measured the effectiveness of the project, what was learned and how this information will be used
- Comment on any unexpected results?
- Describe any staffing or organizational changes while implementing this project.

C. Financial

For a *general support* grant, please submit the organization's statement of income and expenditures for the year in which the grant was used.

For *project support*, in addition to the organization's statement of income and expenditures, please submit project income and expenditure information compared to the approved project budget. Please explain significant discrepancies. *Project expenses allocated toward lobbying or legislative activity MUST be detailed either as a percentage of the project (i.e. "no more than 5% of the project budget was spent on lobbying or legislative activity,") or as the total amount that was spent on such expenses (i.e. "\$5,000 was spent on lobbying and legislative activity.")*

D. Attachments (optional)

Please include relevant materials about the project or organization.