###### Rochester Women’s Giving Circle

**Grant Report Form**

**Upload this Report Form in the Grant Portal** [**linked here**](https://www.grantinterface.com/Home/Logon?urlkey=racfg)**. Please review your due dates on your portal dashboard.**

**Questions about the Portal? Email: dperry@RACF.org**

|  |
| --- |
| **Organization Name:** |
| **Program Name:** |
| **Contact Person who Prepared This Report:** |
| **Title:** |
| **Phone:** |
| **Email:** |

|  |  |
| --- | --- |
| **Type of Report**  **(Choose One):** | **Time Period Covered in Report:** |
| Midcycle | Month Day, Year – Month Day, Year |
| Final | Month Day, Year – Month Day, Year |

**The purpose of this report is to compare expected efforts with those actually achieved during the *time period covered in this report*. You may include additional efforts and learning, but do not omit anything that was submitted in your original Logic Model. Use additional space if needed, by inserting rows to the tables below.**

# 1. Activities

|  |  |
| --- | --- |
| List all of the **activities** in your Grant Application’s Logic Model that **you expected to conduct** in the time period covered in this report. | Has the activity been completed as expected during the time period covered by this report? Explain differences and how you addressed barriers and how you plan to address them in the future. |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

### **Target population**

|  |  |
| --- | --- |
| Identify the **target population** youdescribed in your Grant Application including numbers of people **you expected to serve** during the time period covered in this report. | Describe the **actual population** and number of **people served** during the time period covered by this report. If different from expected, explain why and share your plan to address the difference in the future. |
|  |  |

1. **Outcomes and Targets**

|  |  |  |
| --- | --- | --- |
| List all of the **outcomes you agreed to measure** in Section 4B of your Grant Application during the time period covered in this report, along with the measures and projected levels of success | List all of the targets/performance standards/projected levels of success you established in Section 4B of your Grant Application during the time period covered in this report. . | Report on the **actual targets/performance standards/levels of success you achieved** during the time period covered in this report. Please include numbers or percentages where appropriate. |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Describe any differences** between what you hoped to accomplish and what you actually accomplished. Include a description of any changes you plan to make to reach your outcomes in the future. |
| 1. **Lessons Learned**   Were there any lessons learned over the reporting period? Think about effective program strategies program strategies, realistic outcomes and the on-going value of the project. |
| **FOR FINAL REPORT ONLY** |
| 5. How have /will you adjust your organization or future programs? |
| 6. How did the actual program revenue and expense align with the proposed program budget in your application?  Describe any significant variances and how you addressed them. |
| 7. Will this program continue in the future? \_\_\_\_\_Yes \_\_\_\_\_ No |
| 8. Please comment on your ability to evaluate the sustainability of the success your clients experienced beyond the grant period |
| 9. Have you collected evaluations from participants? If so, please attach samples with names deleted. |