

## BEACHWOOD SCHOOLS PTO—PROJECT FINAL REPORT FORM



Grant Code Number/Grant Project Name:

Grant Amount:

Date Awarded:

Date of Report:

Name of Awardee

Address

Contact Person's Name

Contact Person's Phone Number

Contact Person's E-mail

Number of Students Served by the Project

Number of Adults Served by the Project (if applicable)

### **Narrative Section:**

1. What were you able to achieve as a result of the grant? [If the project was successful, please provide evidence that the project had the intended impact.] Please describe successes and outcomes.
2. How were the grant funds used to enable these accomplishments?
3. The PTO recognizes that circumstances can change, possibly affecting project implementation and intended outcome. What, if any, difficulties, challenges and or limitations were encountered? What refinements were made to overcome unforeseen obstacles?
4. What were the most challenging aspects of the project?
5. Based on your experience, what might you have been done differently, if you had the chance?
6. Please describe any post-grant plans for your project/activity?
7. What plans have been made for financial sustainability should the PTO not fund the project for a subsequent year?
8. If project is to be continued, what would you like to pursue to continue or augment the impact of this activity?

### **Financial Section:**

1. Were all of the grant funds expended? Were funds spent as intended? If no, please explain and note if any grant funds remain.
2. Please provide a budget showing final expenses and income for the project.

The undersigned hereby certifies on behalf of the grantee that the information contained in and submitted with this Grant Proposal Report is accurate and complete.

Name:

Title:

Signature:

Date: