Formula Grant
Project Summary Report

Project Name: ________________________________________________

Subrecipient: __________________________ Project Number: ________________

Award Amount: $ _______________ Project Period: _______________________

Federal Funds Spent: $ ______________________

Number of volunteers for the project ___________ Total hours________

1. Is this project continuing?  □ Yes  □ No

2. How is it being funded? (Client fees, grants, donation, etc.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

3. What was the assessed need for your program, and to what extent did you meet the need(s)?

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________________________________________________________________________

4. What were the strengths, accomplishments, and successful features of your program?

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5. Did you try anything innovative? If so, please explain.

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6. Identify challenges that you encountered with implementing your program and explain and steps that were taken to overcome those problems.

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7. Other comments. (Attach additional sheets if necessary.)

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Project Director’s signature ____________________________ Date ____________________

Financial Officer’s signature ____________________________ Date ____________________