

COOS COUNTY CULTURAL COALITION
Grant Project Evaluation Report

Final Report (Completed project) _____ or Interim Report (Not completed) _____

Applicant Name: _____ Amount of Award Grant _____

Applicant Address: _____

Purpose of Grant Award (project description): _____

1. Is your project completed? YES NO

If not, when do you anticipate it will be? _____

2. How would you rate the success of your project?

Highly Successful Successful Minimally Successful Not Successful

Why?

3. Did the project meet your goals? YES NO

How or why not? _____

4. How many people were involved in your project? _____ How were they involved? _____

5. How many people benefitted from your project or could in the future? _____

Explain: _____

6. Referring to the priorities listed in the Coos County Cultural Coalition Plan as posted on our web site: www.ccculturalcoalition.org - Please list the priorities you feel your project addressed/accomplished and how: _____

7. Please itemize the expenditures that utilized your grant award: _____

Signature of Grant Recipient _____ Date _____