

COOS COUNTY CULTURAL COALITION

Grant Project Evaluation Report – Grant Year _____

Final Report (completed project) _____ or Interim Report (not completed) _____

Applicant name: _____ Amount of grant award _____

Applicant address: _____

Purpose of grant award (project description): _____

1. Is your project completed? YES NO

If not, when do you anticipate completion? _____

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 website, 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: _____