

SULLIVAN COMMUNITY EDUCATION FOUNDATION
MINI AND MAJOR GRANT EVALUATION



SULLIVAN COMMUNITY EDUCATION FOUNDATION

NAME OF APPLICANT(S):

TYPE OF GRANT (CIRCLE ONE): MINI GRANT MAJOR GRANT

DESCRIBE THE PROJECT

DESCRIBE THE TARGET POPULATION

EXPLAIN HOW THE PROJECT OUTCOMES WERE MEASURED AND ATTACH ANY EVALUATION INSTRUMENT(S) THAT WERE USED. PHOTOS HIGHLIGHTING THE PROJECT OUTCOMES ARE WELCOMED.

PROVIDE EMPIRICAL OR STATISTICAL DATA THAT DEMONSTRATES ACCOMPLISHED OUTCOMES.

COMPLETED BY: _____ DATE: _____

Please return the completed evaluation to Becky Batman, Unit Secretary, upon completion of the project or no later than May 1st of the year following the award.