

# GRANT RECIPIENT PROGRESS FORM



*"The Mission of the Cape Coral Community Foundation is to support the public well-being and to improve the quality of life in the greater Cape Coral community through the stewardship of permanently endowed and gifted funds."*

## **Organization Information**

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

## **Project Information**

Project Name:  
\_\_\_\_\_

Grant Amount: \_\_\_\_\_

Project Time Frame:  
\_\_\_\_\_

**Please answer the following questions as completely as possible.**

**A. Resources**

1. Provide income and expense report for the project with budgeted and year-to-date figures.
2. Has this grant attracted additional support in the form of people, money, goods, services, or publicity? If so, please describe.

**B. Results**

1. What impact did this project/grant have on your organization and on the community?
2. How many were served by this grant?  
How do you know? Include information about participant satisfaction if appropriate.
3. Did this project meet, exceed, fall short, or vary in any way from your initial expectations? Were there unexpected outcomes? Please describe.

**C. Cooperation**

1. Describe the impact of any cooperative efforts involved in planning, implementing, funding and/or evaluating this project.

**D. Future**

1. What is your vision of this project over the next three years?  
If applicable, include plans for on-going expansion, replication, or termination.

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**Signature**

**Date**