

OSHKOSH AREA COMMUNITY FOUNDATION
Final Grant Report
(Due 30 days after ending grant period)

Name of Organization: _____

Program Name: _____

Amount of Grant: _____ Date of Grant: _____

CEO/Executive Director: _____

Person Completing Report: _____

Phone: _____ Email: _____

Please answer the following questions on a separate sheet of paper. Attach supporting information if needed. Please restrict your narrative to a maximum of four pages.

1. Please indicate how many people were served through your grant and to what capacity?
2. What results were accomplished toward your program goals and objectives, as outlined in your proposal? List each goal and objective with each result.
3. Did you experience any obstacles to completing your goals and objectives? If so explain the obstacles and what your organization did to overcome those obstacles to make this grant a success.
4. Did you make any adjustments in the original plans, timetable or budget?
5. What were your expected outcomes? List the outcomes and results and/or data (please use numbers not percentages).
6. What difference did this program make in the lives of the participants? What difference has this program made overall in the area of Basic Needs?
7. Share the difference this program has made with one or more success stories.
8. Please include a separate sheet showing expenditure of grant funds to date.
9. Other comments?

Please return completed Final Report to Cheryl Fowler via email
cheryl@oshkoshareacf.org