TOWNSHIP OF ST. CLAIR
PROJECT EVALUATION FORM

Applicant Information:

Organization Name	
Contact Name	
Telephone Number	
Email Address	

Project/Event Description:

What specific results were achieved through the funding of your project?

Did this grant benefit the community as anticipated or expected? Explain.

As a result of this grant did your organization increase or enhance partnerships and collaborations with other groups in the community? Explain.

If you received a financial grant, attach to this report:

- ☐ A financial report that outlines the project income (funding) and expenditures.
- ☐ Invoices for the event, program, or project.
- ☐ Photos of the completed event, project, or program

Print Name	Signature	Date