

# PEOPLE PARTNER GRANT EVALUATION FORM

**INDIVIDUAL/GROUP:** \_\_\_\_\_

**COUNTY:** \_\_\_\_\_

*Return by November 1<sup>st</sup> via mail, email or fax:* Montana 4-H Foundation  
 Email: 4hfdn@montana.edu PO Box 173580  
 Fax: 406-994-5417 Bozeman, MT 59717-3580

*Please respond to the following (attach a separate piece of paper if needed):*

1. Give a brief statement of the project for which you received the grant.
2. What groups or organizations did your project impact? (Interview at least one recipient who will comment on the impact this project had in your community and attach their comments to this form.)
3. What steps did you take to plan and complete the project?
4. What was the total cost of your project? (Include breakdown by funding source and donated or in-kind costs.)
5. Please evaluate your project: (including community partners)

	<b>Youth</b>	<b>Adult</b>
How many individuals were involved with your project?		
Approximately how many volunteer hours were involved in the completion of the project?		
How many people were impacted by your project?		

6. Which community partners worked with you on your project?
7. Attach news clippings, photos (electronic preferred) and other information to supplement your project evaluation (if available).

*Name(s) and title(s) of person(s) completing this report:*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_