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GRANT COMPLETION AND EVALUATION FORM

The Ashtabula Foundation is pleased to have participated in funding your request. To assure the effectiveness of our grants and to assist our grantees in reaching their objectives, the Foundation will participate in the evaluation of the projects it funds. The intent of this form is to receive your acknowledgement of the fulfillment of your responsibilities under the terms of the Foundation's grant. Please be as specific as possible. Return your answer to the Foundation office with a covering letter reflecting any further comments you may wish to emphasize. **Please return this completed form within 30 days after the completion of your project. A follow-up visit may be scheduled for on-site review purposes. Failure to return this completed form may jeopardize future grant applications to the Ashtabula Foundation.**

GRANTEE'S NAME _____

ADDRESS _____ PHONE _____

PURPOSE OF ORGANIZATION _____

CONTACT PERSON _____ PHONE _____

AMOUNT OF FOUNDATION GRANT _____

TERMS OF FOUNDATION GRANT (As expressed in Foundation grant letter) _____

PURPOSE(S) FOR WHICH FOUNDATION GRANT WAS USED: _____

DATE(S) THAT FOUNDATION GRANT FUNDS WERE DISBURSED BY GRANT RECIPIENT
(Attach an accounting for the total project for which the grant was approved, including an itemized list of expenses, i.e., Vendor, Description and Cost)

What has been the measurable impact to date of this project:

A. . . .on the operation of your organization?

B. . . .on the people you serve?

I hereby acknowledge that our Foundation grant disbursement fulfilled the terms and guidelines of the grant.

Signature

Date

FOR USE BY THE ASHTABULA FOUNDATION ONLY:

- a) Was the Ashtabula Foundation grant effectively and appropriately used?

- b) Did it make a significant difference in the project?

- c) Based on the utilization and impact of this grant, what considerations should be given toward future requests from this organization?

Foundation Representative

Date: _____