

## **Lions Quest Community Partnership Grant Report Form**

Please follow the outline below. The Lions should retain a copy of the final reports for their records.

D	istrict/Multiple District	Date of Report						
Person completing the report (name/title)								
1. Summary of activities completed to date:								
	Number of Workshops	Number of Teachers Trained	Number of Students Benefitted					
	<ul> <li>Describe any program development completed under this grant (ex: translations, adaptations, evaluations):</li> </ul>							
	<ul> <li>Describe any Lions Quest promotional activities, including informational sessions for Lioneducators, government officials and other potential partners involved with these activities</li> </ul>							
	<ul> <li>Describe any partnerships that were established with school districts, community organizations, and government agencies:</li> </ul>							

Attach photos and any relevant publicity from grant funded activities:

2.	What benefits or advantages have been gained as a result of this project? (ex: new or potential partners for curriculum translation and program evaluations, new schools interested, new funding sources or leads, government support, other developments):
3.	What challenges did the Lions encounter in implementing activities during this phase? Do you have any recommendations for other Lions interested in carrying out a similar project? :

4. Financial information on the activities for this report:

Please provide a budget showing all income and expenses for activities carried out under the Community Partnership grant. Income should equal expenses. <u>Provide appropriate</u> <u>documentation to verify expenses</u>, <u>including paid receipts/contracts</u>.

Income		Expense	
LCIF Community Partnership Grant	\$10,000 USD	Translation*	
Other Income (Please		Curriculum	
specify)		Adaptation/Design*	
		Workshop Fee*	
		Workshop Logistics	
		Curriculum Material Cost	
		Trainer Expenses	
		Evaluation*	
		Seminars/Meetings*	
		Publicity*	

		Other (Please specify)*	
Total Income		Total Expense	
*Some categories may not be ap	olicable to your pro	ject.	
Comments on proposed budgets			
5. Additional comments:			
6. Signature and endorsement:			
Signature			
Name			
Email			

Telephone