



# ACBL EDUCATIONAL FOUNDATION Project Summary and Evaluation

*Please download this form, fill it out on your computer, and email the completed form to: [Kristen@ACBLEducationalfoundation.org](mailto:Kristen@ACBLEducationalfoundation.org)*

The purpose of this form is to collect information that helps the ACBL Educational Foundation determine the extent to which its grants are furthering its mission. It will also help the grantee assess the success of the project.

**1. General information:**

Name of Project: \_\_\_\_\_

Name of Project Administrator: \_\_\_\_\_

Starting and Completion Dates of Project: \_\_\_\_\_ to \_\_\_\_\_

Address: \_\_\_\_\_

ACBL Unit & District: \_\_\_\_\_

Project Director: \_\_\_\_\_

ACBL Unit #: \_\_\_\_\_ ACBL District #: \_\_\_\_\_

**2. Proposed and actual expenses:**

| Expense Category | Proposed | Actual | Foundation Support | Other |
|------------------|----------|--------|--------------------|-------|
|                  |          |        |                    |       |
|                  |          |        |                    |       |
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|                  |          |        |                    |       |
|                  |          |        |                    |       |
| <b>TOTALS:</b>   |          |        |                    |       |

3. Was the project run primarily as described in application? If not, please explain the changes and why.

4. Goals - Outcomes and success levels:

Please complete the following table using the goals listed in your application. For each goal please give a brief description of the outcome using “How we will measure it” information from your application and the level of success (*very successful, somewhat successful, not successful*). Please give details explaining success level.

|               |                               |
|---------------|-------------------------------|
| <b>GOAL 1</b> | Brief description of goal:    |
|               | Brief description of outcome: |
|               | Level of success (V, S, N)*:  |
| <b>GOAL 2</b> | Brief description of goal:    |
|               | Brief description of outcome: |
|               | Level of success (V, S, N)*:  |
| <b>GOAL 3</b> | Brief description of goal:    |
|               | Brief description of outcome: |
|               | Level of success (V, S, N)*:  |

\*V, S, N - (Very Successful, Somewhat Successful, Not successful)

5. *What contributed most strongly to successfully meeting the goals?*

6. *If you were to do the program again, what would you do differently to improve it? Why?*

7. *Do you have plans to continue the program?*

8. *Where did the project primarily take place? (elementary school, secondary school, bridge club, etc.)*

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9. *How many people were in the program when it started?* \_\_\_\_\_

10. *How many people were in the program when it finished?* \_\_\_\_\_

11. *What phrase best describes the people who attended the program? (students, adults)*

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12. *Final thoughts:*