



## **2010 YOUTH SERVICE GRANT REPORT FORM**

Using this form is optional — you may write your report in your own format if you prefer as long as your report covers the information requested on this form. Please remember that since your chapter received a Youth Service Grant, a project report is required in order for your chapter to remain in good standing; keep a copy of your report for your records. The due date for your project report was noted in the letter you received/will receive confirming your chapter's grant.

**Chapter Name:** \_\_\_\_\_ **College or University:** \_\_\_\_\_ **Section/Region:** \_\_\_\_\_

**Submitter's Name:** \_\_\_\_\_ **Chapter Office (if any):** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_ **Telephone #:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Required Attachments to this report form (in addition to essay answers):

Copies of all receipts for grant expenditures.  Photos of project.

Check for unused funds (if not all of the funds awarded to your chapter were used for this project).

### **PROJECT DETAILS**

Name of project: \_\_\_\_\_

Project location: \_\_\_\_\_ Project date/s: \_\_\_\_\_

Project chair's name, email address, phone number and chapter office (if any) if different from the submitter of this report: \_\_\_\_\_

### **PROJECT FUNDS/COST**

Amount of 2010 APO Youth Service Grant awarded to your chapter: \_\_\_\_\_

Did you use all of the 2010 APO Youth Service Grant funds granted to your chapter for this project?

*\*If not, you must return unused funds to the APO National Office.*

Total cost of project (please note where you got additional funds from if your total project cost was more than the amount of the grant you received): \_\_\_\_\_

### **ATTENDEES**

Number of children served through this project: \_\_\_\_\_

Age range of children served: \_\_\_\_\_

Who were the children who attended this project? How did you identify them and/or tell them about the project? \_\_\_\_\_

Did anyone else attend/participate in this project? If so, who/how many people? \_\_\_\_\_

## **CHAPTER INVOLVEMENT**

Total number of chapter members involved in the project:

Total number of members currently in your chapter:

Total hours of service performed before, during and after this project by APO members and any other people you engaged to help (you may estimate):

Did you work with any other volunteers for this project? If so, who/how many people and how did you connect with them?

How did your chapter find out about the APO Youth Service Grant program and/or what made you decide to apply? (If you learned of/were reminded about the program in multiple ways, please note them all).

## **ESSAY ANSWERS (PLEASE ATTACH ADDITIONAL SHEET/S)**

ESSAY ANSWER 1/Project description:

- What was the event?
- What activities/events occurred at the project?
- How did you develop the project idea?
- What were your chapter's responsibilities in planning for/executing this project?

ESSAY ANSWER 2/How things went:

- Did things work out the way you expected?
- What challenges did you encounter and how did you handle them?

ESSAY ANSWER 3/Grant impact:

- How did the Youth Service Grant help this project and/or your chapter?

ESSAY ANSWER 4: Future Plans:

- Do you plan to do this project again?
- What would you want to change if you did the project again?

ESSAY ANSWER 5 (Optional)/Additional Thoughts:

- Feel free to include an additional essay answer with any further thoughts if you would like to.

MAIL COMPLETED REPORTS TO  
Alpha Phi Omega  
Youth Service Grant Committee  
14901 E. 42<sup>nd</sup> Street  
Independence, MO 64055-7347



Make sure you've completed both pages of the report form and included your pictures, receipts and essay answers!

OR e-mail your report to [admin@apo.org](mailto:admin@apo.org)