



# Small Grant Report

for

Program Name

Organization Name

## **Instructions & Hints**

1. Fill in your program and organization name, above.
2. Type an answer following each item below.
3. Generally, short, precise, and clear answers are preferred over long responses.
4. This *Small Grant Report* template is designed to correspond to the “Request To Support a Program” section of the *Small Grant Proposal*. Review your proposal prior to completing this *Report*.
5. When you have completed the *Report*, delete this “Instructions & Hints” section and the instructions below.
6. Do not include additional information not requested or attach documents.

Feel free to email the Foundation for clarification: [mckraushaar@georgiasown.org](mailto:mckraushaar@georgiasown.org).

## **GRANT PERFORMANCE**

1. Was the money used for the program exactly as described in your *Grant Proposal*? If something changed, explain it. (*Use less than 50 words.*)
  
2. Did you encounter any problems with this program? If so, how did you deal with them? (*Use less than 100 words.*)

## **PROGRAM RESULTS**

(*For the next three questions, list 2-4 line items for each program parameter. If available, include quantities or other metrics. E.g., how many of the “activity” you did, or how much of an outcome was achieved.*)

3. **Activities:** key **internal** activities the organization undertook to operate the program (not ones that “touch” the population that you serve).
  - i.
  - ii.
4. **Outputs:** primary **external** activities the organization conducted that provided services to the population that you serve.
  - i.
  - ii.

5. **Outcomes:** changes in the behavior, knowledge, skill, attitude, or situation of the population that you serve, generated by your program. (*Outcomes should match those specified in your Request To Support a Program.*)
  - i.
  - ii.
  
6. Do you anticipate the program will achieve its goals for the year? If not, why? If it will exceed its goals, describe why. (*Use less than 50 words.*)

### ADDITIONAL COMMENTS

7. If you would like to provide additional information about the program the grant supported, state it here. (*Optional. Use less than 200 words.*)

### AFFIRMATION

I affirm that the information in this *Small Grant Report* is true in every respect.

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Signed

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Date

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Name

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Title

### SUBMISSION INSTRUCTIONS

Do not add a cover letter to your *Grant Report*. This form is sufficient.

Mail or email a signed copy of this *Report* to:

Ms. Marin Kraushaar  
Georgia's Own Foundation, Inc.  
Post Office Box 105205  
Atlanta, GA 30348

[mckraushaar@georgiasown.org](mailto:mckraushaar@georgiasown.org)