



Community Engagement and Outreach Grants Closeout Report

General Information

Full Name

Please enter your full legal name. (first and last name)

Job Title

Please select your current job title and/or role within your organization.

Email Address

Please provide your email address.

Organization Website

Provide the official website of your organization.

Fiscal Period

Select the fiscal period.

Agency

Select the name of the agency or organization you represent.

Program

Select the specific program.

Grant Title

Select the grant type you received. (This can be found on the first page of your contract.)<https://www.thechildrenstrust.org/partner/grants/community-engagement-outreach-grants/>

Funding Award Amount

Select the funding amount you received. (This can be found on the first page of your contract.)

Do you partner/collaborate with other organizations?

Indicate if you collaborate with other organizations in your work.

| | |
|-----|----|
| Yes | No |
|-----|----|

Have you received additional funding (in addition to The Trust funding) for your services?

Indicate if you have secured any other funding for your services.

| | |
|-----|----|
| Yes | No |
|-----|----|

Does your funding support any of the following:

Select the areas that your funding supports. (Select all that apply.)

☐ Staff Salaries

☐ Marketing

☐ Program Supplies

☐ Field Trips☐ Direct Service Cost☐ Capacity Building☐ Operational Costs☐ Not Applicable☐ Other**Time of Service Provided**

Select the time in which the services were provided.

☐ Summer (occurring between the months of June and August)☐ School Year (occurring during the school year between the months of August and June)☐ Year-round (occurring during both the school year and summer between October and the following September)**Narrative Summary**

Provide a brief summary of the activities and goals of the program. Please refer to your application and contract to ensure alignment with the approved scope of work. (Maximum of 250 words)

Program Analysis**Strength & Impact**

Please select all that apply regarding the strengths and impact of the program:

☐ Mentorship & Personal Growth☐ Academic Support & Readiness☐ Social & Emotional Development☐ Creative & Innovative Learning☐ Financial & Career Readiness☐ Physical Wellness☐ Family & Community Engagement☐ Other

Strength & Impact (Highlight successes and positive outcomes.)

Describe what aspects of the program worked well, including successes and positive outcomes.

Challenges & Obstacles

Please select all that apply regarding the challenges and obstacles of the program:

- ☐ Funding and sustainability
- ☐ Logistics
- ☐ Capacity Building
- ☐ Enrollment, retention, and attendance
- ☐ Parental engagement
- ☐ Staffing
- ☐ Resources
- ☐ Academic and behavioral challenges
- ☐ Impact measurement and program growth
- ☐ Technology and administrative barriers

Not Applicable (What difficulties were encountered? How were they addressed?)

Provide specific examples of challenges you faced and how they were addressed or overcome.

☐ Other

Opportunities for Growth & Reflection

Please select all that apply regarding the opportunities for growth and reflection of the program:

- ☐ Program expansion, sustainability, and long term funding
- ☐ Logistics and operational improvements
- ☐ Community engagement and involvement
- ☐ Educational and skills development enhancements
- ☐ Data-drive program evaluation and impact measurement
- ☐ Inclusivity and accessibility
- ☐ Recruitment and outreach
- ☐ Mentorship

☐ Professional development

☐ Capacity Building

Opportunities for Growth & Reflection (How can the program be improved? What lessons were learned?)

☐ Other Describe what you have learned and how the program could be improved in the future.

Files Upload

Upload Documents

Upload any documents, ensuring that photo releases and related paperwork are maintained in your records.

Choose File

Upload your Trust Academy Certificates

Upload any relevant Trust Academy certificates (if applicable).

Choose File

Provider Site

| | | |
|-----------|--|--------|
| Site Name | Select your site location name from the dropdown menu. If it's not listed, choose 'Other' from the dropdown menu and then enter the site location where services were conducted. If services were conducted at more than one site location, click 'ADD MORE' on the bottom left, and add the additional sites. <div></div> | Delete |
| Address * | <div><div></div></div> | |

Add More

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