



Children and Youth Initiatives Fund Accountability Form

Organization Name:
Address:
Contact Person:
Phone:
Email:
Name of Project:

1. Type and amount of grant received:

<input type="checkbox"/> Youth Initiated Project or Event	Amount: \$
<input type="checkbox"/> Agency Initiated Project or Event	Amount: \$

2. Briefly describe the project:

3. Project Evaluation:

- a) How were the Fund Objectives met? (Please refer to objectives if necessary.) What other benefits beyond the objectives were noted?

- b) What difficulties, if any, did you encounter in initiating this project? What action(s) did you take to address the difficulties?

4. How many children or youth participated in the project?
5. What was the range of ages of participants?
6. How many participants were City residents?
7. What other agencies/groups participated in this project, either directly or indirectly through the provision of funding or in-kind assistance?

Agency/Group	Funding or In-Kind?

8. What period of time did the project run?
9. Can you provide us with a quote, anecdote or a success story from one of your program participants? (Optional)

Thank you!

Please contact Leah Herman at 604-983-7385 or lherman@cnv.org if you have any questions.