

Boone County Covid-19 Response Grant Final Report Form

Organization _____

Total Grant Amount _____

Address _____

Person Completing Report _____

Phone Number _____ Email Address _____

Name of Program _____

Start Date _____ End Date _____

What was the number of people served from this grant?

Were you able to disaggregate the number of people served by race, gender, and/or other demographics? If so, please provide that information. If unable to disaggregate, why?

Were there any changes from your original application in how the funds granted were used? Please explain.

Was your program able to meet the goals that were established when applying for the BCCRG? How did it meet the needs of the people served? Please give an overview of the most successful outcomes from your program.

Please describe any problems you encountered with your project/program.

How did the grant help your organization? Did your organization need to seek additional funding for this particular program?

How can the Foundation be more effective or responsive to your organizations' needs?

Please provide any brochures, printed materials, or pictures on the program you provided.

You may email back completed form and any attachments to Melissa Erickson at merickson@boonecountycf.org or BCCF 600 South State St. Suite 302, Belvidere, IL 61008