

Grant Completion Report

(Please submit this form within 1 month of grant program completion or delivery of funded resources.)

Name of Grantee(s): _____ **Date:** _____

School(s): _____

Signature: _____ **E-mail:** _____

Project Title: _____ **Amount Granted:** _____

1. Describe the extent to which the funded project met the original goals and objectives.

2. What was the educational impact of the funded project?

3. Did you encounter any unexpected obstacles or opportunities with this project? (Please explain.)

4. Please provide any additional information you would like to share with The Foundation for MERS regarding the grant you received. Please attach any reports or progress data you may have.
