Sample Grant Recipient Project Evaluation Form

## [LCC Name]: Grant Evaluation Form

Please answer the following questions and return your response with your reimbursement request. Your request for reimbursement will be considered incomplete without this self-evaluation.

If you have questions, please contact **[LCC member]** at **[phone number]** or **[email]**.  Thank you.

* Name of program
* How many people attended or took part in the project/performance?
* Who took part in/attended the project?  Did it reach underserved members of the community?
* Were the program and services marketed to reach the broadest possible range of people?
* Were there measures in place to make the program financially accessible to disadvantaged families and individuals?
* Do you collect and use feedback from participants about the project, such as program content or facility choice?
* What was the impact of your project on your community?
* Please attach copies of press, advertisements, fliers, etc.