



ANNUAL PROJECT REPORT

For Community Organizations that received 2009 funding from **High River FCSS**

Deadline: February 26, 2010

*Personal information on this Annual Project Report is protected by the privacy provisions of the Freedom of Information & Protection of Privacy Act.
If you have any questions, contact Shelley Koot, Manager of Community Support Services at 403-652-8620 or skoot@highriver.ca.*

Organization Information

1. Name of Organization:

2. Contact Person:

Address:

Telephone:

Fax:

Email:

3. Project Name:

4. Project Description (50-100 words summarizing project)

5. Board of Directors:

Name

Position

2009 Project Information

6. Project Logic Model

Please review your High River 2009 FCSS Funding Application Form. Since your initial application last year, have there been any changes in the Project Vision, Mission, Statement of Need, Strategy, Rationale or Goals. If yes, what were those changes?

7. Inputs

Please attach your 2009 (or most recent) Financial Statement

Please also describe your Fund Raising Activities in 2009:

8. Outputs

Volunteers:

Number of Volunteers involved during the year:

Number of Volunteer hours during the year:

Clients Served:

Youth under 12:

Youth over 12:

Adults:

Seniors (over 65):

During the year of this project please indicate number of clients who were...

High River Residents:

MD of Foothills Residents:

9. Describe Outcomes Achieved in 2009:

Short-Term Outcomes

Mid-Term Outcomes

Long-Term Outcomes

Describe Outcomes Not Yet Achieved:

Short-Term Outcomes

Mid-Term Outcomes

Long-Term Outcomes

10. Indicators of Success

Describe the evidence that you have collected to show that you achieved your outcomes.

11. Measurement Tools

List the Measurement Tools that you used to measure your outcomes.

12. What changes would you make to improve your project/program?

13. Optional: Share a success story

This is to certify that to the best of my knowledge and belief, the information included in this Annual Project Report complies with the requirements and conditions set out in the Provincial FCSS Conditional Agreement Regulation Service Requirements.

Name (Agency Signing Authority)

Position