

Fox Performing Arts Charitable Foundation

462 N. Taylor Avenue
St. Louis, Missouri 63108
(314) 534-0880
admin@foxpacf.org

2010 Grant Evaluation Report

Date:

Organization:

Name of Project:

Project Start Date:

Project End Date:

Amount Awarded:

Organization Address:

City:

State:

Zip Code:

Contact Person:

Contact Person's Title:

E-mail:

Telephone: ()

Fax ()

Instructions

Fox Performing Arts Charitable Foundation requires grant recipients to complete a report addressing the program and outcome of the funded project. The report is due within **THIRTY DAYS** of the completion of the project and must be submitted on this form. Please send eight (8) copies of this report. This report and any attachments must be three-hole punched or placed in sleeves ready for insertion into a three-ring binder. The purpose of this report is to aid in the assessment of the impact of the Foundation's awards in the community. Any questions about this process should be sent to admin@foxpacf.org.

Please complete the following **in the space provided** – **12 pt. font required**:

1. What were the goals/objectives of the project?

6. What other sources of funding supported the project? Please attach a financial statement for the completed project.

7. Did the Foundation grant award precipitate additional funding?

8. Please indicate the following:

Date(s) of performances:

Number of performances:

Total audience attendance at project: (young people _____ adults _____)

Number of performing artists participating:

Total Number of personnel who worked on this project including artistic & administrative staff, technicians and volunteers:

IF APPLICABLE (e.g. Interactive educational programs):

Number of students participating _____

9. How was the Foundation grant award recognized in publicity, printed materials, verbally or otherwise? Please list below and attach dated documentation.

10. Did you receive any evaluations or feedback on this project? Please attach copies if possible.

11. What additional comments or suggestions do you feel might be important to assist Fox Performing Arts Charitable Foundation in better serving its mission?

Attachments

- All attachments should be three-hole punched or delivered in sleeves ready for insertion into a three-ring binder.

-Please attach 8 copies of any printed materials on which the Foundation's logo or name were used.

-Please list any additional attachments in the space below. Please include 8 copies of these additional attachments.

Certification

I certify that this organization met all eligibility requirements. I further certify that all of the information contained in this application is true to the best of my knowledge.

Name of authorizing official _____

Title _____

Signature _____

Date _____

**Send completed grant evaluation form, copies
and requisite support materials to:**

**Fox Performing Arts Charitable Foundation
462 N. Taylor Avenue, Suite 203
St. Louis, Missouri 63108**