



CITY OF
MITCHAM

Grant Evaluation Report

SECTION A: Grant Recipient Details

Name of group or organisation

Contact person

Email

SECTION B: Grant Information

Grant title

Amount granted by Council

\$

Grant reference number

What was the primary aim or goal of the project?

Do you believe the aim or goal was achieved? Yes ☐ No ☐ (please justify with responses on the next page)

Describe the outcomes your project achieved and the positive impact(s) on the community:

What target groups did your project involve? How many people were (in)directly involved? Be specific in responding by listing the type of participant, eg volunteers, participants, spectators, households reached and numbers for each participation.

Would you consider the project a success? It is recommended that you link your answer to the selection criteria you addressed in your original application when responding to this important question.

What, if any, future projects or outcomes are expected to arise out of this completed project?

How was Council's contribution to the project acknowledged by your organisation? Please attach copies of any marketing collateral acknowledging the City of Mitcham.

Financial Statement *It is preferred that an audited statement of project income and expenditure from a Financial Officer is attached to this form. Failing this, please detail below the income and the expenditure of the grant **including a summary** and attach receipts / tax invoices of expenditure. This statement should be signed by an authorised officer of the organisation such as the Treasurer. Reminder: The expenditure must reflect the original budget proposal in your grant application.*

Please note that your name, photos and or quotes from this report may be printed in Council publications including social media. *Please ensure all people named in your story or are in your photos have provided permission for it to be used. If providing photos, please ensure they are high resolution.*

Please include any images or videos you may have of your project

By signing, I confirm all details contained within this document are a true reflection of the expenditure and outcomes created as a result of funding from the City of Mitcham's Grants and Sponsorship Program.

Name:

Title:

Date:

Signature:

An authorised officer (Treasurer) is required to sign this report on behalf of the group or organisation.

Name:

Title:

Date:

Signature:

Please return your completed form to grants@mitchamcouncil.sa.gov.au