



P.O. Box 286
Garrett, IN 46738

IMPACT REPORT

(Must be submitted within 60 days of project completion)

Name of Applicant(s): _____

Project Title: _____

of Students Benefited: _____

Project Period: _____

Describe the project implementation by focusing on the following three What happened (both positive and negative)? Why did it happen? What should happen next? – Please include your results.

Attach complete record of expenses.

Attach 4-5 photos to be used in Foundation publications.