# Canterbury Education Foundation

**GRANT EVALUATION FORM**

The mission of the Canterbury Education Foundation, Inc., is to provide financial

support for educational  projects, programs, and initiatives that foster innovation and excellence in the Canterbury Public Schools.

*Submit this completed form within three (3) months of the end of the project to*:

**Canterbury Education Foundation, 45 Westminster Road, Canterbury, CT 06331-1538**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number directly involved in project: Students \_\_\_\_\_\_\_\_ Teachers \_\_\_\_\_\_\_\_ Grade levels \_\_\_\_\_\_

Number indirectly impacted: Students \_\_\_\_\_\_\_\_ Teachers \_\_\_\_\_\_\_\_ Grade levels \_\_\_\_\_\_

**Budget**:

Amount approved: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount expended: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the amount approved differs from the amount expended, please explain:

**Project Summary**: Please explain the outcome of the project, as it related to your initial goal(s). Also include what the students learned from this project.

If your grant was for a new program, do you expect this to continue? If yes, how will this program be funded in the future?

Additional Information or Comments:

Signatures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CES or BMS Principal

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Superintendent