**END PROJECT REPORT**

Please submit at least three photographs with signed release forms from your project with this report for use by United Way of West Central Minnesota.

**Return completed report to**:

UnitedWay of West Central Minnesota, PO Box 895, Willmar, MN 56201 or renee@liveunitedwcm.org

**Project Title:** Click here to enter text.

1. Number of people involved in the planning of this project:

 Click here to enter text.

2. Number of people who attended/benefited from this project:

 Click here to enter text.

3. Describe the project.

 Click here to enter text.

4. Did you accomplish what you set out to accomplish? Do you consider this project a success?

 Click here to enter text.

 Example: Click here to enter text.

5. What would you have done differently?

 Click here to enter text.

6. What changes happened as a result of this project?

 Click here to enter text.

7. Did this project provide parent education? If so what?

 Click here to enter text.

8. How do you intend to continue this project, or similar projects, in the future?

 Click here to enter text.

9. How did you give recognition to United Way of West Central Minnesota for funding your project?

 Click here to enter text.

10. Name and Number of Contact Person.

 Click here to enter text.

\****United Way of West Central Minnesota requests an end project report from agencies within six months of receiving grant funding.***

**Thank You!**