

LIVE UNITED



United Way of West Central Minnesota

Partner Agency Mid-Year Report Report Due: February 15, 2018

Agency Name: [Click here to enter text.](#)

United Way Funding Year: July 1, 2017 – June 30, 2018

Funding Amount Requested: [Click here to enter text.](#)

Name of individual(s) responding to/providing information for the completion of this form: (please include name, phone number, address, email)

[Click here to enter text.](#)

- 1. Has your agency experienced any significant changes in mission, financial condition or personnel in the past 6 months? Yes No**

If yes, please explain: [Click here to enter text.](#)

- 2. When your agency applied for United Way funding last fall, for what purpose(s) did you intend to use the funding?**

[Click here to enter text.](#)

- 3. How has the funding been used so far this funding year?**

[Click here to enter text.](#)

- 4. If you used the funding in a manner different than what you proposed when completing your request for funding, please explain the reason for the change.**

[Click here to enter text.](#)

- 5. Throughout your work in the community, do you see any emerging needs for programs and services not currently provided? Are there new problems presenting themselves that your agency or the community needs to address?**

Please describe. [Click here to enter text.](#)

- 6. Outcome Success Story** - Please provide a success story for each funded program (in a format appropriate for publication in our campaign marketing) that best illustrates your program outcomes/results. The story should illustrate your program's effect on a single individual or family. Direct quotes, examples, photos from client/family members, etc. are wonderful to have. Please limit your response to one page. If you are including a photo, you must have permission to use the photo in this manner.

[Click here to enter text.](#)