

Phoenix Office of Arts and Culture
Final Report for Collaborative Communities Grant

I. PROJECT DATA:

Project Title: _____

Organization: _____

Street Address: _____ City: _____ Zip: _____

Report Submitted by: _____ Phone: _____

Project START Date: _____ Project END Date: _____

Total Number of Teaching/Facilitation Artists: _____

*Demographics of Teaching/Facilitation Artists: _____

Total Number of Youth Participants: _____

*Demographics of Youth Participants: _____

Total Number of Adult Participants: _____

*Demographics of Adult Participants: _____

**Demographics: quantify gender, age, and ethnic representation*

Total Number of Workshops/Performances: _____

Council District(s) of participants: _____

<https://www.phoenix.gov/mayorcouncil/find-my-council-district>

Additional comments/narrative about data collected:

X _____
Signature of Authorizing Official

Date: _____

II. PROJECT DESCRIPTION:

Attach narrative discussing the completed project. Please use the following headings:

A. Project Goals

- List the project goals from your initial application.
- What project goals were accomplished?

B. Project Activities

- List specific activities which took place with the financial support of this grant.
- Include dates, locations, project participants, and length of the project.
- If any of the activities indicated in previous project descriptions were changed, altered, or canceled, please explain.

C. Project Assessment & Evaluation

- Methods & Outcomes
 - Attached results from Quantitative Data collection (i.e., pre-post surveys, rating, and rankings)
 - Attached results from Qualitative Data collection (i.e., interviews, photos, videos, narrative responses)
- Reflect
 - What were the outcomes of your assessment and evaluation?
 - What were the major benefits of the project? Describe what participants learned as a result of the project.
 - If you were to repeat this project, what changes would you make?

III. PROJECT BUDGET : Note: Inadequate or delinquent reports may affect future funding.

FINAL PROJECT BUDGET

Outline below the budget for the specific project described in this application. **Itemize** expenses in each category.
Refer to the Glossary for explanation of terms. Please round up numbers to the nearest dollar.

Note: CASH EXPENSES MUST EQUAL CASH INCOME

EXPENSES		CASH INCOME (Revenue + Support)	
Expenses (cash only)		Revenue (earned income - cash only)	
1. Personnel/Staff		9. Admissions	\$ _____
a) Administrative	# of staff _____ \$ _____	<i>(refer to Glossary)</i>	
b) Artistic	# of staff _____ \$ _____	_____	
c) Technical/Prod	# of staff _____ \$ _____	_____	
2. Outside Fees & Services		10. Contracted Services	\$ _____
a) Guest Artists:	\$ _____	_____	
_____		_____	
_____		11. Other Revenue	\$ _____
_____		_____	
_____		_____	
b) Consultants/Other Experts	\$ _____	Support (contributed income)	
_____		12. Corporate Contributions	\$ _____
_____		_____	
3. Production Expenses	\$ _____	_____	
_____		13. Foundation Grants	\$ _____
_____		_____	
_____		_____	
4. Space Rental	\$ _____	14. Other Private Contributions	\$ _____
_____		15. Government Support	
_____		a) Federal	\$ _____
5. Travel	\$ _____	b) Regional	\$ _____
_____		c) State	\$ _____
_____		d) County	\$ _____
6. Marketing/Promotion	\$ _____	e) City	\$ _____
_____		<i>(do not include this grant request)</i>	
_____		Total Government Support	\$ _____
7. Remaining Operating Expenses	\$ _____	16. Applicant Cash	\$ _____
_____		17. Cash Income <u>Without Grant</u>	\$ _____
_____		<i>(Total items 9 thru 16)</i>	
_____		18. Grant Award Amount	\$ _____
8. Total Cash Expenses	\$ _____	19. Total Cash Income	\$ _____
<i>(Total Items 1 thru 7)</i>		<i>(Total Items 17 and 18)</i>	