

Catholic Foundation of Northeast Kansas Grant Follow-Up Report

Fall grants must turn in follow-up report by March 31, 2024.
Please email or mail to the Catholic Foundation of Northeast Kansas.



Grantee Name: _____

Grant Cycle: Fall Yr 20_____

Contact Name: _____

Address: _____

Purpose of Grant: _____

Grant Award: \$_____

Please answer the following questions.

1. What were the outcomes of your program? Were you able to accomplish what you planned in your grant proposal? How effective was this grant in meeting the need stated in the grant application?

2. Exactly how was the grant money spent?
- a. Was your estimate accurate so that all of the money was spent?
- b. If more grant money was necessary, how did you fund the need or how did you cut back on your plans?

3. If the CFNEK grant was used for anything other than your originally stated purpose, please explain why. Did you discuss this in advance with CFNEK? Please describe how the project's implementation differed from the plans outlined in your proposal.

Report Author Name & Title: _____

Signature: _____ Date: _____

- Photo(s) Uploaded: Yes No
- We grant permission to use photos in publications and social media.
- We also agree that photos including minors have already been approved for release prior to sharing them with the Catholic Foundation of Northeast Kansas.