



THE FOUNDATION

For the School District of the City of St. Charles

2016 FOUNDATION GRANT QUESTIONNAIRE

Congratulations on receiving a grant from the Foundation. As a final phase of the grant process, please provide written responses to the following questions and mail or email them to the below address within 60 days of grant implementation. Failure to do so may cause you to be ineligible for consideration during the next grant cycle. Thank you very much for your cooperation.

TEACHER(S) NAME(S): _____

SCHOOL: _____

GRANT NAME: _____

POSSIBLE OBSERVATION DATES: _____

- a. **Summary of Expenses** (please attach additional sheets if necessary)
a. **NOTE:** You are asked to return any unused funds to use for other Grants.

b. Expense Description _____ Expense Amount
\$

\$ _____
Total

- b. Please provide the following information:
- Date of Implementation _____
 - Grade(s) that benefited _____
 - Number of students receiving benefit from Grant _____
 - Please describe how your objectives of the Grant were met. Feel free to include pictures and Student Testimonials (attach additional sheets if necessary)

e. While we need to know if you accomplished your goals for the grant , we are equally interested in understanding what (if anything) did meet your expectations and why. Please describe any unfavorable results of the grant implementation.

f. Would you recommend your grant to other staff members/faculty of the district? Explain.

g. Briefly provide any additional information that you feel would be useful to educate the Foundation regarding your grant.

We are very pleased we were able to help you teach your students in new and innovative ways!

The Foundation for the School District of the City of St. Charles Board of Directors