SaskCulture Inc.

ABORIGINAL ARTS AND CULTURE LEADERSHIP GRANT

Project Grant – Follow-up Form

Identification

Name of Organization					
Name of Registered (Supporting) Organization - if applicable					
Mailing Address		Postal Code			
Maining Address		Postal Code			
21		F . 11.11			
Phone#	Fax#	Email Address			
Contact Person		Title			
Project Name					
Grant Number	Amount being requested on follow-up	Project Date(s): MM/DD/YY			

Attachments

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Project Evaluation: Provide a brief <u>one-page report</u> on the project, including what actually took place and the impact/benefit the project had on participants and Saskatchewan. In the form below, please record information of the number of paid leaders, number of volunteers, participants as well as the age range of each target population on this form. Please estimate as close as you can if you are unsure.			
Number of <u>Full-Time paid</u> leaders covered in part or in whole by the Aboriginal Arts and Culture Leadership Grant:			
Number of <u>Part-Time paid</u> leaders covered in part or in whole by the Aboriginal Arts and Culture Leadership Grant:			
Of the Full-Time and Part-Time paid leaders, how many were youth?			
	19-29yrs old:		
Number of Volunteers who assisted directly in the program implementation:			
Of these Volunteers, how many were youth?	0-18yrs old:		
	19-29yrs old:		
What is the total number of workshops/programs implemented through the Aboriginal Arts and Culture Leadership grant:			

What is the total number of participants in all workshops?	
Please estimate what percentage of the participants are:	
0-4 Years Old	%
5-14 Years Old	%
15-18 Years Old	%
19-29 Years Old	%
30-54 Years Old	%
55+ Years Old	%
Number of Participating communities. Please list:	•

Financial Report Provide a cost report showing actual project expenditures and a full schedule of actual revenues, including grants and self-generated revenue related to the project. Include copies of receipts to verify accountability. All receipts must be dated within the granting period. (Follow-up budget form enclosed.)

Promotions Profile

Include a description and/or evidence of how Saskatchewan Lotteries and SaskCulture were publicly acknowledged as a source of funds for the program.

Certification

We the undersigned do hereby affirm that all conditions stated in the guidelines for this program have been met and that this follow-up form constitutes a correct and true statement.				
Signature of President		Signature of Treasurer		
Name of President (Print)		Name of Treasurer (Print)		
Phone	Date	Phone Dat	te	

 $f: \verb|wp|coordinator of first nations \& metis initiatives \verb|aacl|aacl project follow-up form updated 2008.doc||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl||aacl|||aacl||aacl||aacl||aacl||aacl||a$