

TRUST FUND

For Sport, Culture & Recreation

**Community Grant Program
for Sport, Culture & Recreation**

PROJECT REPORT FORM

to be completed by the Project Coordinator

Name of Community Group:

Project #:

Project Name:

Grant Received:

1. Which of the following categories would you consider your project:

----- Sport

----- Culture

----- Recreation

2. Project date(s):

3. Please provide a brief description of the project.

4. Was this program aimed at increasing participation in any under-represented populations within your community?

If ----- yes, then continue to the next question

If ----- no, then proceed to question #7

5. Which of the following under-represented populations were included in your project.

----- seniors

----- indigenous people

----- economically disadvantaged

----- women

----- persons with a disability

----- other _____

----- single parent families

6. How were the above target populations involved in the planning, operations and evaluation of this project?

7. What were the ages of the participants? (indicate as many as applicable)

----- 0-10

----- 11-20

----- 21-30

----- 31-40

----- 41-50

----- 50+

8. How many people participated in your project?

----- 0-10 ----- 11-20 ----- 21-30 ----- 31-40 ----- 41-50 ----- 50+

9. How many volunteers were involved with this project?

----- 0-10 ----- 11-20 ----- 21-30 ----- 31-40 ----- 41-50 ----- 50+

10. Where did the project take place?

11. What would you consider to be the most significant successes of this program?
Please note this information may be used in Saskatchewan Lotteries promotional material. If we require further information, whom should we contact?

NAME: _____ PHONE: _____

12. How did you publicly acknowledge Saskatchewan Lotteries as the source of funds for the project?

----- Posters ----- Word of mouth ----- Newspaper ----- Other

----- Banners ----- Speeches ----- Newsletter _____

Description of Expenditures	Dollar Amount	Receipts Attached ✓
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
TOTAL EXPENDITURES:	\$ _____	

Our project grant = \$ _____ and our attached receipts = \$ _____

Project Coordinator Signature: _____ Date: _____

If you require any assistance while completing this form, please contact your Regional Recreation Association or the Community grant Office at 780-9344 (Regina area) or 1-888-780-9344 (Toll free).

PLEASE SUBMIT THIS FORM TO YOUR COMMUNITY CONTACT PERSON.

