



Contact Information

Organization Name (insert logo if available):

Contact Name, Email and Phone:

Mailing Address:

Grant Project/Program Outcomes

1. Briefly describe the grant project/program:

2. What is the future of the grant/project/program?

3. Describe successes and accomplishments of the program/project:

4. Describe the challenges of the project/program:

Budgeting

5. Were you on target with your established budget for this program/project? If over budget, please explain how accomplished the program/project successfully. If under budget, please explain how you will use excess funds.

Evaluation Process

6. Please explain the evaluation process and outcomes of your program/project.

Impact Report

8. What else would you like to tell us about your program/project?

9. Insert photos and/or video links to share the impact of these grant funds. Please note that you are not limited to only two photos! We welcome you to submit additional photos as separate attachments.

Share video here using a link (Google Drive, YouTube, Vimeo, etc.):

To submit video directly from a mobile phone, send via email to foundation@michigandental.org