Annual Report for Great Expectations Programs

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| Organization Name: |  |
| Grant ID Number: |  |

In eight pages or less, provide responses to the report questions listed below.

* Restate each question.
* Please refer to your application when responding to these questions.

As Great Expectations is a long-term initiative, we are really interested in learning about your progress and helping to mitigate challenges. We hope that you will be as thorough as possible in helping us understand these successes and challenges.

### Your Participants

1. Use one or more of the attached spreadsheets (providers, children, adults) to capture information about participants and organizations served by your program.

Please provide information about as many of these groups as are relevant to your program including both direct program participants and end-beneficiaries.

Program participants are those who participate directly in grant-funded activities. End-beneficiaries are helped indirectly as a result of grant-funded activities. For example, if you provide professional development or technical assistance for early childhood educators, the educators’ students and their families benefit indirectly.

If there is additional information about the participants you serve that you would like to share that is not included on the spreadsheet, please include it here.

1. What are your income eligibility requirements or criteria, if any? What percentage of participants and/or end beneficiaries served by the program are low-income? Although the low-income percentage is also on the spreadsheet, please provide a summary here.

### Your Program

1. Describe the work of this program. What did you do to achieve the anticipated impact? Please include information about specific activities (i.e., frequency and length of trainings and services provided).
2. What are you learning from the implementation of this program? Please share any significant challenges and indicate any changes in activities from what was proposed in the application.

### Your Impact

1. What impact were you committed to achieving at the end of the grant year? What impact have you achieved so far? Please include specific numbers in your responses where applicable.
2. Were there any additional impacts achieved with your participants or your organization beyond that originally expected in the application? If so, what was that impact?
3. For any shortfalls in impact, please explain why they occurred. We encourage you to highlight challenges in achieving the results that you sought. Describe what you could have done differently and cite external factors that may have played a role.
4. How are you measuring impact? Please list the tools used—e.g., CLASS, pre/post surveys. If you used a survey, what percentage of participants responded? Please include the results from and blank copies of surveys and assessments as an attachment.

### Partnerships and Strategic Connections

1. When you consider your grant-funded activities, who else is doing *similar* work in Forsyth County? Do you partner with them? If you do, please describe that partnership. If you don’t, why not?
2. With whom else do you partner in this work? Please describe the nature of your primary partnerships for this grant. Please indicate which of these partnerships are new.

### Participant Engagement

1. Do you use input from program participants and/or end-beneficiaries to inform your programs and services? If so, how, and if not, why not? Remember that participants/ beneficiaries could be a combination of providers, caregivers, and families (see Question 1).
2. Are program participants and/or end beneficiaries involved in helping design, administer or evaluate your programs and services? If so, please indicate their level of involvement and describe the ways in which participants are engaged in that process. If not, why not?

## Expenditure Report Instructions for Operating Programs

Develop an expenditure report showing the actual expenditures and income for your operating program during the most recent year of the grant period.

* The expenditure report should be done in a comparable format to the application budget.
* The expenditure report should include *budgeted* figures for each expense and income line item as well as *actual* figures for each expense and income line item.
* Indicate for which expense line items KBR funding was used. Invoices or backup documentation is not needed.
* Are there any unexpended KBR funds? If so, clearly indicate the amount.
* If any of your expense line-items would benefit from additional explanation, please provide the details at the bottom of the expenditure report.
* Your expenditure report must be signed and dated by your organization’s CEO/Executive Director or other authorized individual.