



Warren Kiwanis Club Evaluation Form

This form should be returned to the Warren Kiwanis Club when the funded project is completed. Attach additional pages as needed.

Organization Name _____

Project Name _____

Project Start/End Date _____

Funds Amount Awarded _____

Contact Person Name/Title _____

Signature _____

Telephone _____ Email _____

Describe how the project goals and objectives were met as well as the impact on the organization, community and/or population served. What were the lessons learned including any unanticipated results, if any?

Attach a detailed accounting of how the specific dollars from this award were spent; proof of actual cost of the project.

Attach any press or news items relating to this Kiwanis-funded project.

Mail the completed evaluation to: Warren Kiwanis Club, Attention: Funds Committee, P.O. Box 891, Warren, Ohio 44482. Future funding is dependent upon the evaluation form being completed and returned.