

**Community Engagement and Outreach Closeout Report**

**Direct Service Program Enhancement**

This Closeout Report should be completed by an authorized official within the agency/organization.

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| **Name** |
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| **Title** |
|  |
| **Provider/Organization Name** |
|  |
| **Program Name** |
|  |
| **Email** |
|  |
| **Site Location(s)** |
|  |
| **Date(s) of Services** |
|  |
| **Website** |
|  |
| **Grant Award Amount** |
| $ |
| **Narrative**Explain how the award was used and how this grant award assisted you in your work to improve the lives of children and families. Include the specific services or activities. |
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| **Number of Elementary School Participants (Grades K-5) (if applicable)** |
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| **Number of Middle School Participants (Grades 6-8) (if applicable)** |
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| **Number of High School Participants (Grades 9-12) (if applicable)** |
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| **Number of System Involved Youth (Ages 16-21) (if applicable)** |
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| **Percentage of Children with Disabilities (if applicable)** |
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| **Total Number of Participants** |
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| **Strengths/Impact**Describe the strengths or positive impact of your program, service, activities or event. |
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| **Challenges/Obstacles**Explain the challenges and/or obstacles of the program service, activities or event supported by this grant. |
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| **Opportunity for Growth/Reflection on Impact** |
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| **Upload Documents (i.e., photos, videos and /or event promotional materials that highlight the services supported by this grant)**(Ensure photo releases are maintained in your records.) |
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| **Upload your Trust Academy Certificates** showing evidence of course completion, if applicable. |
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