



Our mission is to promote the health, welfare, and education of children in Saratoga County

HAWLEY FOUNDATION FOR CHILDREN GRANT FINAL REPORT

MUST BE TYPED OR COMPUTER REPRODUCED

DATE: _____

CONTACT INFORMATION:

Full Legal Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Organization website: _____

Organization President/Executive Director: _____

Title: _____

Phone #: _____ E-mail address: _____

Contact person (If different): _____

Title: _____

Phone #: _____ E-mail address: _____

Program/Project Name funded by this grant: _____

Amount of Grant: _____

Indicate type of Grant Received (i.e. general operating, special program support or startup funds): _____

Grant period dates: _____

Geographic area served: _____

Number of children in Saratoga County served by this grant: _____

Please answer the following questions:

1. What was the purpose of the grant?

2. Who were/are the beneficiaries of this project (please include the number of clients served)?

3. If applicable, were other sources of funds successfully identified for future funding?

4. Briefly outline how the grant was spent.

5. Please highlight the lessons learned from this project.

Please note that any new grant applications will not be considered unless previous grant final reports were received.

Please provide assurance that your Board of Directors or governing body has approved the project, and grant funds were used in accordance with the terms of the application.

"I hereby verify and attest that the information herein is true, upon personal information or upon best information and belief"

Signature: _____

Please return your report by January 30th of the year following your grant award to:

The Hawley Foundation for Children

P.O. Box 1017

Saratoga Springs, NY 12866

or email to: info@hawleyfoundation.org

High quality photographs and letters are welcomed for our website and Facebook page. We request that you obtain the proper consents prior to sending us the photos.