



Opportunity Grant

Final Report 2015

Grant #: _____

Start Date: _____

End Date: _____

Final Report Due Date: _____
(45 calendar days after project completion)

Final Report Received: _____

By: _____

Date of Report: _____

PROJECT DIRECTOR INFORMATION

Applicant Name	Email Address	Phone Number
Check One: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff	Department:	

PROJECT INFORMATION

Project Title <i>(Limit 10 words)</i>	Project Start Date <i>(May not start before November 10)</i>	Project End Date <i>(Must be completed by May 31)</i>

PROJECT EVALUATION

Project description: *(From Application Form)*

Expected goal/outcome: *(From Application Form)*

Evaluation of Outcome Achievement:

Summary of Results:

Lessons Learned:

How have you shared the results of your project with members of the college community and the community at large?

PROJECT BUDGET

DESCRIPTION	Comments:	Projected Expenses for This Grant	Actual Expense Amount to this Grant
Salaries/Stipends			
Fringe Benefits			
TOTAL SALARIES & BENEFITS			
DIRECT EXPENSES:			
Class Fee/Registration			
Supplies/Materials			
Travel Expenses: <i>transportation, lodging, meals directly related to this project</i>			
Contractual/Consultant Fees			
Fees for licenses or certifications			
Marketing: <i>Publication, Production & Dissemination</i>			
Computer Services			
Other Direct Expenses:			
TOTAL DIRECT EXPENSES			
TOTAL GRANT (May not Exceed \$2,000)			

Electronic submission of this document will be considered your official Final Report and an electronic acknowledgement of receipt will be sent upon receiving it. If you have not received an acknowledgement within 3 days of submission please contact the SC Foundation Administrative Assistant.

Please submit your final report to your supervisor by “cc” them at the time you submit it to the SC Foundation Office.

For inquiries or to submit your report:

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 Sheridan, WY 82801
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