

PROJECT REPORT FORM

School / Org / Camp		Program Date:	
Project Title:		Date of Implementation/Completion:	
Project Outcome: (description)			
Activities/achievements within the 3-month period:			
Month 1:	Month 2:	Month 3:	
Actions that still need to be done/completed for the coming month/s:			
What have you learned from the experience of implementing this project? If you were to do this project again, what are the things that could have been done better or differently?			
Date of Submission:			