



GRANT REPORT FORM

(Please complete this form and enclose it with your next grant request.)

Name of Organization:		
Name of Program:		
Contact Person/Title:		
Telephone:	Fax:	Email:
Date Grant Received:	Amount of Grant:	Grant Period:

1. **Major activities and accomplishments, during the grant period:**

2. **Any problems or special concerns:**

3. **Significant results:**

4. **Specific use of funds received from ACC, during the grant period:**