



SARA CRAIG-SCHECKMAN, *Executive Director* | MICHAEL CRAIG-SCHECKMAN, *Director of Finance*

KRIS ANDERSEN, *Grants Manager & Program Officer* | ANGIE PLESHE, *Communications/Research & Program Officer*

35 5th Street, Unit 208, The Olympian | PO Box 776429 | Steamboat Springs, Colorado 80477 | 970.879.0148 | csff4rc.org

Youth Advocacy Project Reporting Form - 2019

Reporting Forms are due one year from the date your organization received funding. If you are applying for a new grant, you must submit this form one month prior to the YAP Grant Application deadline. No further grant requests will be considered until this report has been completed and returned. ([See Grant Guidelines](#) for more details).

This form is to be completed for Program/Project or General Operating grant awards. Print the form or fill it out electronically using [Adobe Acrobat Reader](#), then click 'Save As'. Do not use your web browser to fill out the form - your work may not be saved.

Name of Organization:

Mailing Address, City, State, and Zip:

Website: Phone:

CEO or Executive Director:

Contact Name: (if different from Executive Director)

Contact Phone: Contact Email:

Program/Project Name: (if applicable)

Date YAP Grant was received: Amount of Grant:

Purpose of Grant:

Have there been any changes to your organization's IRS 501(c)(3) not-for-profit status since you were awarded this grant?

If yes, explain:



Provide total number and demographics served:

Specify numbers and percentages of Routt County youth with multiple risk factors, youth with special needs and/or youth who experience socio-economic marginalization that were served.

Did the program serve the intended population?

If not, explain:

How did you assess the direct needs of youth and families? Explain your methods.

Were the program activities executed as planned?

If not, explain:

Report on the progress made towards meaningfully improving the lives of youth.



Attach any and all relevant evaluation reports.

Provide meaningful anecdotal information of success such as testimonials or unsolicited letters of support. Type below or attach relevant files.

Describe any significant collaborative efforts that occurred during the grant implementation.

What are the plans for sustaining or expanding the program? Also, discuss any general lessons learned and how changes will be made based upon these realizations.

In addition to providing YAP funding, what are some other concrete ways the CSFF could help your organization achieve success?

By signing below, I certify that the information contained in this YAP Reporting Form is true and correct to the best of my knowledge.

CEO/Executive Director

Date

Please mail a hard copy of the form to:

CSFF
P.O. Box 776429
Steamboat Springs, CO 80477

Also email the form to:

kris@yap4rc.org