

OPPORTUNITY GRANT

FINAL GRANT IMPACT REPORT

GRANTEE INFORMATION

**Grant/project start date:** Click here to enter a date.

**Grant/project end date:** Click here to enter a date.

**Grantee Name**: Click here to enter.

**Funded Project Name:** Click here to enter.

**NARRATIVE**

Please answer these required questions 1-7 and attach required documents.

##### **In bullet-point format, report on the following:**

##### **Achievement of items in your Summary of Objectives, Activities and Deliverables**

##### **Note objectives not achieved, activities not conducted or deliverables not completed and explain why**

##### **Achievement of new or revised objectives and activities you pursued as the project unfolded.**

##### **Answer these service delivery questions, if applicable.**

##### **If this was a direct service project, please report the number of people served.**

 [ ]  Not Applicable Number Served Click or tap here to enter text.

##### **If this was a training project, please report the number of people trained.**

 [ ]  Not Applicable Number Trained Click or tap here to enter text.

##### **If the project included the dissemination of educational materials, please report distribution numbers.**

 [ ]  Not Applicable Number Disseminated Click or tap here to enter text.

1. **In one to three sentences, please explain the role the ABE grant played in helping you complete the project? If the ABE grant helped secure other needed project funding or helped forge new partnerships, please report this.**

1. **If possible and without compromising client confidentiality, please briefly describe a situation where this project helped an individual, family, or community. This story can be about a client, a lawyer whose work improved after training, or a staff member impacted by the project.**
2. **In your application, you described how you would evaluate the success of your project. Briefly summarize your project evaluation activities and results (you can use bullet points). If you produced a formal/official evaluation report, please attach it to this submission.**
3. **In bullet-point format, report how your organization recognized the ABE for its grant to your organization. If possible, please attach samples of recognition provided (e.g., annual reports, website pages, publications, press releases, program books, etc.).**
4. **If the Opportunity Grant you received was for seed money to begin a project/program that will continue, please report on your plans or success in securing funding for continued work.** [ ]  Not Applicable

#### BUDGET REPORTING

Please complete the Final Project Budget Report and submit it with this narrative report.

**OTHER ATTACHMENTS**

If ABE funding helped create tools and resources (videos, websites, materials, reports, training handbooks, etc.), please attach them or links to where they can be accessed. You should also remember that the grant agreement requires recognition of ABE funding on these materials. Please reach out to obtain approval of recognition language or use of the ABE logo.

**REPORT CONTACT INFORMATION**

**The person who prepared this report:** Click here to enter name.

**Phone:** Click or tap here to enter text.

**E-mail:** Click or tap here to enter text.

**Date Submitted:** Click or tap to enter a date.