Project TITLE:	
TOTAL Budget of You	ır Project: \$
Total Youth Contribut	ion Funding Used by Your Project: \$
Contact Person:	
Mailing Address:	
Telephone:	
Fax:	Email:
l, my knowledge.	declare that all information in this document is true to
Signature:	Date:

NOTES/INSTRUCTIONS:

This report will be used in two ways:

- (1) As part of the year-end evaluation report for the Youth Contribution Fund.
- (1) To reimburse your project for total actual expenses.

Please:

- ____ Complete all sections of this report.
 - ____ Include a copy of any program photos or materials that are available.
 - ____ Mail or fax the completed report to your regional MACA Office (see last page for contact information).

Please provide an overall summary description (one or two paragraphs) of your project*:

Please answer the following questions:

1.	a) What type of activities did you do? (check all that apply or specify):							
	Traditional Aboriginal cultural events; specify:							
_	School-related	extra-curricular	activities	or	trip;	specify:		
	Development/training of	of a youth organizatio	on; specify:					
	Attended or hosted a Youth Conference; specify:							
	Other; specify:	<u>.</u>						
	b) Did participants travel:							
	Within the Northwest Territories? If so, where?							
	Outside the Northwest	Territories? If so, whe	ere?					
2.	a) How many youth took part in your project?							
	b) Which youth took part	in your project? (check all that	apply)				
	 High School Students Post-secondary Stude 'At-Risk' Youth Youth (15-19 years) Youth (20-25 years) Other 							

- 3. Total programming hours? (e.g. 2hrs/week x 20 weeks= 40hours)
- 4. Who was involved (workers, volunteers, elders, partners) in organizing and running your activities?

Who	What was their role

5.	Please describe what went well with your project - Have you had any major "achievements" to date? If so, please share these as they could benefit other northern communities.					
•						
6.	Do you feel that you met the goals and objectives of your youth contribution project as were described in your proposal?					
	No. Why not?					
	Yes. Why?					
9.	How will you share what you learned with others?					
11.	Did you have any problems with your project? Please describe.					
12.	Other comments?					
App Date	proved By: Signature:					

BUDGET (use extra paper/forms if needed)	Youth Contribution Fund	Other Funding Sources	Explanation: describe all costs, where applicable.
Project Title(s):			•
Materials and Supplies	\$	\$	Comments: please specify the kinds of materials you are buying or will be producing as part of your project
	\$	\$	_
	\$	\$	
A. Total Material and Supply Costs:	\$	\$	
Programming and Coordination Costs	\$	\$	Comments: please specify the programming & coordination costs for your project.
	\$	\$	
	\$	\$	
B. Total Programming and Coordination Costs	\$	\$	
Travel	\$	\$	Comments: please specify the travel costs for your project.
	\$	\$	
C. Total Travel Costs	\$	\$	
Other	\$	\$	Comments: please specify any "other" costs for your project.
	\$	\$	
D. Total Other Costs	\$	\$	
E. <u>TOTAL</u> Funding Used A+B+C+D=E	\$	\$	

Regional Municipal and Community Affairs Staff

Submit your final report to your regional MACA Staffperson

Benji Straker—North Slave Region Sr. Recreation Development Officer PO Box 70 Behchoko, NT X0E 0Y0 Phone: 867-392-6328 or 873-8083 (in YK) Fax: 867-392-6312 or 873-0622 (in YK) E-mail: <u>Benji_Straker@gov.nt.ca</u>

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Colin MacPherson—South Slave Region Sr. Recreation Development Officer Box 283 Fort Smith, NT X0E 0P0 Phone: 867-872-6533 Fax: 867-872-6526 E-mail: <u>Colin MacPherson@gov.nt.ca</u> Donald Kuptana—Beaufort Delta Region Sr. Recreation Development Officer Bag Service No. 1 Inuvik, NT X0E 0T0 Phone: 867-777-7192 Fax: 867-777-7352 E-mail: Donald_Kuptana@gov.nt.ca

Shane Thompson—Dehcho Region Sr. Recreation Development Officer Box 240 Fort Simpson, NT X0E 0N0 Phone: 867-695-7224 Fax: 867-695-2029 E-mail: <u>Shane_Thompson@gov.nt.ca</u>

Keep a copy of the final report, expenditures, and original receipts for your files. The Youth Secretariat has the right to audit a project at any time.

*This year end report has been adapted with permission from the NWT Department of Health and Social Services