

***Development of Official-Language Communities Program -
Community Life component***

APPENDIX F OF THE APPLICATION FORM

REPORT ON RESULTS

Organization's name	Telephone:
Name of Contact Person	Program or Project Title :

REPORT ON RESULTS

YEAR	FROM				TO			
		DD	MM	YYYY		DD	MM	YYYY

Activity component (program funding only)	Targeted direct results	Performance indicators	Summary of achieved activities	Data sources and collection method	Assessment of results achieved

Signature and title :