



**DIVISION 4 RECREATION AND
CULTURE BOARD**

Grant Evaluation Form

Organization: _____

Project Description: _____

Project Completion Date: _____ Amount of Grant received: _____

If project is not complete, explain: _____

Expenses: _____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
Total: \$ _____

Revenue:

Division 4 Grant _____ \$ _____
Other Grants _____ \$ _____
Cash: _____ \$ _____

Number of Division Four residents: _____

Comments: _____

Signature: _____ Date: _____

Print name: _____

Phone number: _____ Email: _____

Please return this form within 30 days of completion of your project. Failure to comply may affect your future application funding.

**Red Deer County Division 4 Recreation and Culture Board
Box 6305, Innisfail, AB T4G 1T1**