

FRIENDS OF CHIMACUM SCHOOLS EDUCATION FOUNDATION

PO Box 192 ~ Chimacum WA 98325

(360)385-3922

501 (c) (3)

GRANT EVALUATION

Submit to: Friends of Chimacum Schools Education Foundation
c/o Chimacum School District Office

Deadline: Upon completion of grant.

| | |
|------------------------|-------------------------------------|
| Grant Time Period: | Project Leader: |
| Name of Project: | |
| Building: | # of Staff Involved: |
| # of Parents Involved: | # of Students Involved or Impacted: |
| Criteria Targeted: | |

Please complete upon completion of your project.

How did this project enhance or support your curriculum?