UNITED STATES DISTRICT AND BANKRUPTCY COURTS FOR THE DISTRICT OF IDAHO



2022 Community Grant Update and Evaluation Form

Please note: insertion fields will expand as you enter text.

Organization:	
Address:	Telephone:
E-Mail:	
Project Name:	Program Director:
Chief Executive Officer:	Other Contact Person:
Total Received:	
Program Narrative: (Please state the exp was done, how and by whom.)	ected outcome and what has occurred since beginning the project. Describe what
Evaluation: (Describe the successes and project improved the administration of jus	failures of the project to date. Did you meet your objectives? Explain how this tice.)
	naining and what grant monies were used to date. Complete a final budget form ands are remaining at the conclusion of the project.)
	ntion Form by August 31, 2022 and within sixty (60) days after completion of above- I future Community Grant on behalf of the U.S. Courts, District of Idaho for five (5) consecutive

Signature:

Title:

Date:

ISB Number:

This completed Update and Evaluation Form must be e-mailed to <u>clerk@id.uscourts.gov</u> prior to the deadline of August 31, 2022 and sixty (60) days after completion of the project in which the grant was received.

Thank you.