Portland Women's Foundation

PO Box 1032, Portland OR 97207-1032

Six- Month Progress Report 2009

DEADLINE FOR COMPLETED PROGRESS REPORTS
Postmarked OCTOBER 15, 2009

Name of agency_____ Date_____

Address_____

Contact person and title_____

Email address _____ Phone _____

Purpose of grant ___operating support ___capital expenditure ___special program ___other

Area of support ___housing ___education

Amount of grant_____

Total number of people served since you received this grant in April ___

What percentage of population are women? _____

To assure the effectiveness of our grants and to assist our grantees in reaching their goals, PWF requests a brief progress report on the programs it funds. Please return this report to the above address by the due date.

- Describe the specific objectives for which the PWF grant was requested and the activities you are undertaking to meet these objectives.

- What have been the results to date of this program on your organization's functioning or effectiveness?

- What has been the measurable impact on the population you serve?

Approximately how many women did you serve with our funding? _____

• As the program has progressed what, if any, modifications have been made?

• Have the funds been totally expended or is their use on going?

• What other sources of funding have been applied to for this program?

Has your agency used funds available from the **Women's Technical Assistance Fund** (WTAF), a joint program of the Portland Woman's Foundation and Women's Care Foundation?   ____yes   ___no
If so, amount received_____

Description of training, consultation or other assistance provided to you by WTAF:

Additional Comments about the PWF grant process:

Signature of Agency Director_____
Date_____

Grant applications are available online at www.portlandwomensfoundation.org

Note: Grant applications from previous grantees will be considered **only** *if a six-month progress report has been received for the current grant.*