**Projects must be completed by March 31, 2020. Reports are due by April 15, 2020.**

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| Information about your organization |
| Today’s date: |
| Name of organization: | Contact person: |
| Mailing address: | Phone: Fax: E-mail:  |

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| Information about your application |
| How easy was the application process? (Please check the best answer for you.) \_\_\_ Difficult \_\_\_ Not too difficult \_\_\_ Somewhat easy \_\_\_ Easy \_\_\_ Very easy |
| How satisfied were you with the way the Literacy Council handled your application?\_\_Dissatisfied \_\_ A little dissatisfied \_\_ Somewhat satisfied \_\_ Satisfied \_\_ Very satisfied  |
| Do you have any suggestions for how this process could be improved in the future? |

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| Information about your project |
| Project start date: | Project end date: |
| Check the type of program that you ran:□ Learning in the Kitchen □ Telling our Stories□ Youth Literacy Nights (please list the events you did below) |
| Briefly describe your project. Describe what activities you did and how often your activities happened. If you hosted any special events or celebrations as a part of your project, please describe them here.  |
| What worked well in your project?  |
| What did not work well? Why not? What would you do differently for another time? |
| What language(s) did you use in your program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Did you use your skill builders program as a way to teach an Indigenous language? How? |

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| Deliverables  |
| How many sessions/events did you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| How many **different people** came to your program or event?*(Count each person once no matter how many times they came. If a person came once, you count them once. If a person came eight times, you still only count them once.)*Adults (age 30 and up) \_\_\_\_\_\_\_ Youth (16-29) \_\_\_\_\_\_\_\_\_ Children (under 16) \_\_\_\_\_\_\_ |
| **Overall,** how many participants came to your program or event?*(Count each person every time they came. If a person came once, you count them once.* *If a person came eight times, you count them eight times.)*Adults (age 30 and up) \_\_\_\_\_\_\_ Youth (16-29) \_\_\_\_\_\_\_\_\_ Children (under 16) \_\_\_\_\_\_\_ |
| Approximately how many of the youth participants (16-29 years old) were not attending school or working during the time of your program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Approximately how many of the youth participants (16-29 years old) were regularly attending school or working? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Approximately how many of the youth participants (16-29 years old) were stay at home parents? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Did you produce any materials? (eg: digital stories, recipe books, etc.)If yes, please tell us about them and also attach a sample to your report.Did you give away any materials? (eg: books, food hampers, camera memory cards, etc.)Please email at least one photo of an event, along with permission forms from everyone in the photo, to nwtliteracy@nwtliteracy.ca.  |

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| Resources |
| Did you use the *Facilitation Skills* manual? Yes: \_\_\_\_\_\_ No: \_\_\_\_\_\_\_\_\_ |
| Which NWT Literacy Council resource(s) did you use in your program?□ *Learning in the Kitchen Facilitator’s Guide**□ Telling Our Story Facilitator’s Guide**□ Youth Literacy Nights Facilitator’s Guide* |
| What topics would you like to see in future *Skill Builders for Youth* resources? |

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| Embedded Literacy and Essential Skills |
| Identify and describe five literacy and essential skills (LES) activities that you did during your project. For each activity, identify the essential skill and describe how you embedded it into the activity. 1.2. |
| 3.4.5. |
| Which embedded literacy and essential skills activities worked best? Why? |
| Which embedded literacy and essential skills activities were difficult to do? Why? |

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| Outcomes  |
| Identify five outcomes of your project. (i.e. people are more confident / youth read more / youth cook more / participants read to their children more / youth learned more about their culture, etc.)1.2.3.4.5. |

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| How worthwhile was your project? |
| Do you think it was worthwhile to run the project? Yes: \_\_\_\_\_ No: \_\_\_\_\_Please explain your answer:  |
| How satisfied were you with your project?\_\_\_ Dissatisfied \_\_\_ A little dissatisfied \_\_\_ Somewhat satisfied \_\_\_ Satisfied \_\_\_Very Satisfied Please explain why you gave it that rating: |
| If money is available in the future, would you apply again? \_\_\_\_ Yes \_\_\_ NoIf ‘No’, please explain: |

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| **Additional comments or feedback for the NWT Literacy Council** |
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| **Please make sure you have attached your mandatory participant and instructor evaluation forms before submitting your report to the NWT Literacy Council.** |

**Please fill in the budget reporting form below. Please sign the form and send it back to the NWT Literacy Council along with the rest of your report.**

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| Amount received | **Amount spent** |
| NWT Literacy Council $ | Space $  |
| List other funding sources in the spaces below. Please provide the amount received or indicate ‘in kind’. | Salaries $ |
| 1. | Honoraria $ |
| 2. | Groceries $ |
| 3. | Transportation $ |
| 4. | Childcare $ |
|  | Materials (Books etc.) $ |
|  | Advertising $ |
|  | Supplies $ |
|  | Administration costs $ |
|  | Other costs (please list)1. $2. $ |
| **Total received $** | **Total spent $** |

### Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NWT Literacy Council, Phone: 867-873-9262

 PO Box 761 Toll free: 1-866-599-6758 Yellowknife, NT Fax: 867-873-2176

X1A 2N6 E-mail: nwtliteracy@nwtliteracy.ca

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| **Submit Your Report** |
| If you need help with your report, or have any questions, please contact us by phone, fax or email. Report are due by April 15th, 2020. Return your report form to: |
| **NWT Literacy Council** **PO Box 761** **Yellowknife, NWT****X1A 2N6**  | **Phone: 1-867-873-9262****Toll-free: 1-866-599-6758** **Fax: 1-867-873-2176****Email:** **nwtliteracy@nwtliteracy.ca** |