United Way of the Yampa Valley (UWYV) Grant Report
Please complete the application by the 2025 grant deadline of February 16, 2025.

Do not use this form if you are awarded a Community Program grant. For Community Program grants, we ask that you send us a letter to tell us how it turned out, including:
   a) What are your results, and how do they compare to what you thought would happen?
   b) Share your success! Do you have one or more success stories or testimonials that you want to tell us to show the difference this program makes in people's lives? If you mention someone (even if not by name) in a way that might identify them with others, please say whether that person permits UWYV to share their story publicly.

Notes about this form:
   1. *Word count limits noted in the sections below are provided for guidance only.   You may use text at your discretion.*
   2. *Program participation and performance numbers requested below may be based on data collected from the date of your last grant report or since the date of the grant award, at your discretion. Let us know the approach you adopted.*

Organization Name and General Information

   • Employer Identification Number (EIN):
   • Organization legal name:
   • Organization AKA or DBA name:
   • Website:

Applicant Contact Information
   • Contact name:
   • Contact title or position:
   • Contact telephone number: Telephone extension:
   • Contact email address:
      — Is the contact person listed above also the organization's executive director? If not, please provide their name:
      — Executive director name:

Program Performance (Complete this section for each program awarded a grant.)

Program Title:

Amount of grant awarded by UWYV:

Complete the Following for Preschool or Early Child Care Tuition Assistance or Fee Discount Program Grants

   • Are you a preschool or childcare provider for children aged 0-5 years (yes or no)?
   • If no, skip to "Program Client Population Demographics and Attributes". If yes, please respond to the following questions:
      — Please send us information about the children who received tuition support using the attached form. Please provide the following information:
         o How many unduplicated children received tuition assistance from UWYV? How many of these children lived in Routt County? In Moffat County? In Rio Blanco?

- o How many of these children or what percentage of this number were low-income children (below 325% of the Federal Poverty Level)?
    - o How many of these children had special needs or risk factors?
  — What is your current Colorado Shines level? (50 words max. recommended)
  — How does your current Colorado Shines level compare to what you expected when you applied for your grant last year? (500 words max. recommended)
  — Skip to "Success Stories and Testimonials"

Complete This Section for All Other 1 and 2-year Program Grants.

Program Participants
- Describe the geographic area served by this program (e.g., by county, by town, by school, etc., as applicable) (150 words max recommended)
- If your grant funded tuition assistance or fee discounts, please explain how you allocated funding to recipients. (500 words max recommended)
- Please complete the following table to indicate how many clients were directly served by the program UWYV funded and how that compared to your projections at the time of your grant application. Please refer to your grant application for client projections.

Program Participation Summary

Clients by County	Year 1				Year 2 (for 2 year grant recipients only)			
	Routt	Moffat	Rio Blanco	Total	Routt	Moffat	Rio Blanco	Total
Projected Unduplicated Number of Clients Served Target								
Actual Unduplicated Number of Clients Served								
Projected Lower-Income % of Clients (<325% FPL)								
Actual Lower-Income % of Clients (<325% FPL)								

Program Demographics
- Please describe any additional demographics and key challenges/issues of your target client population that you think we should understand as context for your program's performance. (500 words max. recommended)

Program Evaluation Method
Did your program evaluation method change from what you described in your grant application? If so, please explain the changes you made to your evaluation method.

Program Performance

Looking back, we are interested to know whether you reached out to and delivered program services to your target population as you expected when you applied for this grant.   We understand and appreciate that circumstances may have dictated different performance levels. If that is the case, describe those circumstances in the results section below.

- **Results**. **Discuss key results or evaluation findings that demonstrated program performance.** (500 words max. recommended):

- **Performance Metrics**: Please refer to your grant application and program output and outcome indicator tables and use two tables like those shown below to show how your actual results compare to your initial targets.

Program Output Results Summary

Description of Program Output (Direct Supports & Services)	Year 1		Year 2 (for 2-year grant recipients only)	
	Target	Result	Target	Result

Program Outcome Indicator Results Summary

Description of Outcome Indicator	Year 1										
	Number Successful Target	÷	Number Participants Target	=	% Success Target	Number Successful Actual	÷	Number Participants Actual	=	% Success Actual
		÷		=			÷		=	
		÷		=			÷		=	
		÷		=			÷		=	
		÷		=			÷		=	
Description of Outcome Indicator	Year 2 (for 2-year grant recipients only)										
	Number Successful Target	÷	Number Participants Target	=	% Success Target	Number Successful Actual	÷	Number Participants Actual	=	% Success Actual
		÷		=			÷		=	
		÷		=			÷		=	
		÷		=			÷		=	
		÷		=			÷		=	

- Based on what you measured, did your results versus your targets help you identify ways to improve your program scope/services/delivery/etc.? (multiple choice: yes, no, not sure)?

Continuous Improvement
- Did you make any changes to improve your program (yes or no)?
    — If so, please describe one or more of these changes and when and why they were made. (If you already have covered this in your discussion of program performance above, please say "See Performance.") (500 words max. recommended)

Complete the Following for All Programs

Success Stories and Testimonials

Please share at least one recent success story or client testimonial that helps show the kind of difference this program has made in your client's lives. If the client wishes, please obscure the client's identity and particular circumstances to protect confidentiality. We plan to use your input to tell your story better during our fundraising. For any success story where the client is identifiable (e.g., a testimonial), please ask the client for permission from UWYV to share that information publicly. (500 words max. recommended)

Additional Program Information

Looking back, is there additional information vital to convey about how you delivered program services or any lessons learned (yes or no)?
- If so, please do so here. (500 words max recommended)

Do you have another program that UWYV funded? If so, please complete the program information section for the next program. *(If the response to the question about the program evaluation method for the next program is the same as for the first program, please refer us to your previous answer.)*

Agreement and Signature of the CEO or Executive Director

By signing below, I certify that the information contained in this report is true and correct to the best of my knowledge.
Signature of the Executive Director/CEO:
Date: