

AOF Year-end Report



Year-end report due April 30/2009

Association:.....

Program Year End Report



Organization: _____

Date: _____

Program Title: _____ Program Year _____

Note: detailed budget must be supplied as an appendix or attached Excel spreadsheet.

FUNDING SOURCES

			Year End REPORT	
			Approved Budget	Actual Mar 31/09
AOF	Cash	a		
Industry	Cash	b		
	In-Kind	c		
Gov't	Cash	d		
	In-kind	e		
Other	Cash	f		
	In-kind	g		
TOTALS		(a+b+d+f)		
		(a+b+c+d+e+f+g)		

EXPENSES

		Approved Budget	Actual Mar 31/09
Manpower			
Travel			
Materials and Supplies			
Communication			
Training and Education			
Capital Expenditures			
Other			
TOTALS			

Note: Totals from this page must match totals from previous page.

Government Sources			<i>Check one or the other</i>	
Name/Description	Cash (\$)	In-Kind (\$)	Secured	Applied For
Total				

Industry Sources			<i>Check one or the other</i>	
Name/Description	Cash (\$)	In-Kind (\$)	Secured	Applied For
Total				

Other Sources			<i>Check one or the other</i>	
Name/Description	Cash (\$)	In-Kind (\$)	Secured	Applied For
Total				

In-Kind Sources	
Detailed description of In-kind amount	In-Kind Amount \$
Total	

Program Year End Reports (continued)

Cut and paste your Program Outcomes here (Section D of AOF application)
1) 2) 3) Etc
Outline changes to your program outcomes based on the approved funding from AOF (if applicable)

Report on the progress towards your Program Outcomes (max.1 page)(from section D of application)
1) Answer directly to number one above. 2) Answer directly to number two above 3) Etc.

What is the total measured Impact of this program. Can be shown as economic, environmental, social etc. Please show what assumptions you have made to achieve this value.
Total Impact of this program is \$_____

I) Partners (Cut and paste from your original application)

Who will you involve in the program and what is their involvement. (max 1/2 page)		
Name/Organization	Contact Name & Phone #	Role/Responsibility

From Section F Report on the successes/progress of your Program Outputs/Activities (max. 1/2 page)

This completed application form is subject to the *Freedom of Information and Protection of Privacy Act* (FOIP).

Applicant(s): (duplicate this section as required)

Name/Company:	
<p>Agreement/Declaration: I/We hereby declare that the information provided in this application is true and accurate to the best of my/our knowledge. The contact, applicant, and their employing institution(s) or organization(s) accept full responsibility for any actions resulting from their work.</p> <p>SIGNATURES:</p>	
Chairman/President of Association	Date

