

AOF Year-end Report



For the Period April 1st – March 31st /2013
Year-end report due April 30/2013

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
			Actual Mar 31/13
		Approved Budget	
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 31/13
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 Reporting On _____

D) Program Outcomes	Success Towards Outcomes	Program Outputs/Activities
Cut and paste outcomes from 2009-2011 application	Describe the success towards achieving your outcomes	What are the activities, completed and ongoing, to achieving your outcomes; Extension, Applied Research Plots etc.
Outcome 1:		
Outcome 2:		
Outcome 3:		

Contributions your association makes to networking and coordination of other programs or organizations.

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Activities Detail

List extension tours, seminars, field days, etc (Include dates held and topic)	Partnering organization	Number	Attendance
Totals			

Applied Research Projects/Trials-List

Title	Year Established	Location

Demonstration Plots - List

Title	Year Established	Location

Other – please specify, newsletters, farm visits, news articles, etc

Total Impact this program has, \$ _____ State assumptions used

How are you evaluating the success of your programs ?

This section is optional and is designed to be shared with others

Overall what are the specific extension activities/research/events that are successful and what are the failures that others could learn from. In general, how is your program going?

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/Association:

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.

SIGNATURES:

Chairman/President of Association

Date