

Community Mini-grants Program Reporting Form

When the Delta Dental Foundation awards a grant, we enter into a partnership with you that we hope will help us to learn more about effective ways to improve oral health. This report is the primary tool we use in measuring the achievements of the programs/projects we support and the impact that our philanthropic dollars have in the communities we serve.

Please complete and return this form to ddf@deltadentalmi.com within one year of receiving funds or prior to receiving additional funds, whichever comes first.

Thank you in advance for taking the time to provide us with a thorough and thoughtful report.

Date:	
Name of organization:	
Address:	
Program title:	
Name of person preparing this report:	Title:
Email:	Phone:
Year grant was awarded:	
Amount of funding received: \$	Amount requested: \$
Number of people served or lives touched as a re	esult of this grant:
Total budget for project/program: \$	Total cost of program: \$
Average cost per person served: \$	

Provide a brief summary of the project for which you received funding:

List the goals for this project and if they were achieved:

Describe the results of this project:

Please provide us with a success story:

What road blocks did you run into, and how were they handled?

Show us your program/project in action:

We want to hear how DDF-supported programs and projects made a difference in your community!

As part of your reporting form, email us: photos (including waiver forms for individuals pictured, if available), press clippings, videos, and quotes and/or narratives from people regarding the impact of the program.

If you post about your project on social media, tag us on Facebook, Twitter and LinkedIn!



QUESTIONS? Contact us at:

Delta Dental Foundation Phone: 517-347-5333 | ddf@deltadentalmi.com