Stronger Communities Programme (Round 5) – End of project report

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| Project number | STCO **\_ \_ \_ \_ \_** |
| Grantee name |  |
| Project title |  |

*The project number, grantee name and project title can be found in the letter of grant agreement.*

1. Project activities

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| 1. **Please confirm:** | **YES** | NO\* |
| **All project activities have been completed** in line with your grant agreement |  |  |
| **You spent the entire grant amount** to undertake the approved project |  |  |
| **You spent your total matching funds financial contribution** (including cash and in-kind contributions) to undertake the approved project |  |  |

IF YOU CANNOT ANSWER **YES** TO ALL OF THE ABOVE QUESTIONS **DO NOT SUBMIT YOUR END OF PROJECT REPORT**

If your project is not complete contact us about your project. Email: [SCP5contracts@industry.gov.au](mailto:SCP5contracts@industry.gov.au)

1. Project Outcomes and Benefits

In relation to your completed project, please respond to the following questions.

1. What was the original outcome of your project (as per your project application)?

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| 1. Please provide examples or feedback from community groups or users of project facilities or equipment as to how the completed project has enhanced or will enhance community well being, participation and improved access to/or increased the use of local facilities. |

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1. How many people will utilise the upgraded facilities/equipment purchased through your project?

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1. Did anything prevent the achievement of your projects intended outcome?

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| 1. Were there any unexpected outcomes and/or benefits of your project ? | yes | no |

If yes, please explain.

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| 1. Were there any lessons learnt from this project that could assist any future community grant project planning? | yes | no |

If yes, please explain.

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(Please note that we may contact you to verify the information provided).

Attachments

Please **submit** (up to 3) **photographs** to evidence yourcompleted project activities as specified in the grant agreement.

1. Certification

I, [first name/last name], [position/title], am a person duly authorised by the grantee to certify that:

* the information in this report is accurate, complete and not misleading and that I understand that giving of false or misleading information is a serious offence under the *Criminal Code 1995* (Cth).
* the grant was spent on the approved project in accordance with the grant agreement.
* I am aware of the grantee’s obligations under their agreement, including the need to keep the Commonwealth informed of any circumstances that may impact on the objectives, completion and/or outcomes of the agreed project.
* I am aware that the grant agreement empowers the Commonwealth to terminate the grant agreement and to request repayment of funds paid to the grantee where the grantee is in breach of the agreement.

Signature……………………………………………….. Date .…/.…/…….