



**Youth Experience Program
Follow Up Form**

Organization: _____

Contact: _____ Position: _____

Address and Postal Code: _____

Phone #: _____ Fax #: _____

Email: _____

Partnering Organization (if applicable):

Organization: _____

Contact: _____ Position: _____

Address and Postal Code: _____

Phone #: _____ Fax #: _____

Email: _____

By answering the following questions the final report will be completed: Use the back if more space is required.

Please outline the details of the program:

Date: _____





Event Destination: _____

Brief outline of the activities: _____

**What were the needs that the Youth Experience addressed in your community?
Check all that apply.**

- The need for quality sport, culture and recreation participation opportunities
- The need for a solid community development approach
- The need to address child obesity
- The need for overall community wellness and positive family and personal lifestyles
- The need for the enhancement of community capacity (skill and leadership)

Please briefly explain how the Youth Experience addressed the needs identified above.

What went well with the Youth Experience?

What difficulties/challenges did you face?



Youth Experience Report Stats:

a. Registration Numbers

Number of Youth Participated	
Number of Males	
Number of Females	
Number of 5-8 year olds	
Number of 9-12 year olds	
Number of 13 – 14 year olds	
Number of 14+ year olds	
Number of Volunteers/Chaperones	

b. Budget-Final Report and copies of receipts: ATTACH PLEASE

c. Evaluation forms: ATTACH PLEASE

Organization’s Contact Signature:

I hereby certify that the information given on this follow up is true and correct.

Signature

Date



**Youth Experience Grant
Budget – Final Report**

Revenues	Budget	Actual
	\$	\$
	\$	\$
	\$	\$
Total Revenues	\$	\$

Expenses	Budget	Actual
Transportation	\$	\$
Nutrition - Meals	\$	\$
Admission Fee	\$	\$
Other	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total Expenses	\$	\$

Please Note:

- Revenues should equal expenses
- Be sure to include amount of Grant requested with Revenues

**Youth Experience Program
Evaluation Form**

Organization: _____

Please mark the box with an "X" based on how you rate these statements as they apply to you following the session:

Item	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
I have attended an event or visited a place I have never been to before.					
The program provided an excellent opportunity to visit something new to me.					
I had fun being in this program.					
I have learned that community volunteers arranged for this program for me.					
I felt comfortable with the group.					
Why did you come to the program?					
What did you get out of it?					

Aboriginal Voluntary Self Declaration (the following is voluntary)

Please check one of the following that is most applicable to your Aboriginal ancestry:

- Status Indian/Treaty Indian
- Non-Status Indian
- Métis
- Inuit