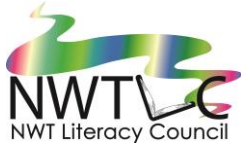


Report Form - Skill Builders for Youth 2017-2018

Information about your organization	
Name of organization:	Contact person:
Address:	Phone: Fax: E-mail:
Information about your application	
How easy was the application process? (Please check the best answer for you.) ___ Difficult ___ Not too difficult ___ Somewhat easy ___ Easy ___ Very easy	
How satisfied were you with the way the Literacy Council handled your application? ___ Dissatisfied ___ A little dissatisfied ___ Somewhat satisfied ___ Satisfied ___ Very satisfied	
About your project	
Which program did you do: <input type="checkbox"/> Learning in the Kitchen <input type="checkbox"/> Telling our Stories <input type="checkbox"/> Youth Literacy Nights (please list the events you did)	



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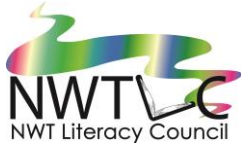
Please briefly describe your project:

What worked well?

What did not work well?

What language did you use in your program? _____

Did you use your skill builders program as a way to teach your Aboriginal language? How?



Report Form - Skill Builders for Youth 2017-2018

Resources

Did you use the *Facilitation Skills* manual? Yes: _____ No: _____

Which NWT Literacy Council resources did you use in your program?

Learning in the Kitchen Facilitator's Guide

Telling Our Story Facilitator's Guide

Youth Literacy Nights Facilitator's Guide

List the 5 embedded literacy and essential skills (LES) activities you did.

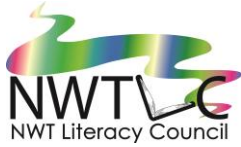
1.

2.

3.

4.

5.



Report Form - Skill Builders for Youth 2017-2018

How worthwhile was your program / project?

Do you think it was worthwhile running the program / project? Yes: _____ No: _____

Please explain your answer:

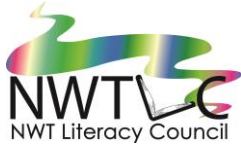
How satisfied were you with your program?

___ Dissatisfied ___ A little dissatisfied ___ Somewhat satisfied ___ Satisfied ___ Very Satisfied

Please explain why you gave it that rating.

If money is available in the future, would you apply again? _____ Yes _____ No

If 'No', please explain.



Report Form - Skill Builders for Youth 2017-2018

Deliverables: Participation (*please read carefully*)

How many sessions/events did you have? _____

How many **different people** came to your program or event?

(Count each person once no matter how many times they came. If a person came once, you count them once. If a person came eight times, you still only count them once.)

Adults (age 30 and up) _____ Youth (16-29) _____ Children (under 16) _____

Overall, how many participants came to your program or event?

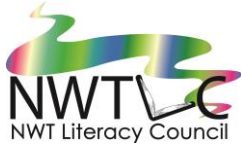
(Count each person every time they came. If a person came once, you count them once. If a person came eight times, you count them eight times.)

Adults (age 30 and up) _____ Youth (16-29) _____ Children (under 16) _____

Approximately how many of the youth participants were not attending school or working during the time of your program? _____

Approximately how many were regularly attending school or working? _____

Approximately how many were stay at home parents? _____

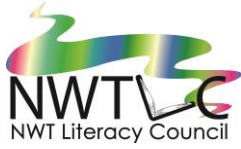


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Did you produce any materials? (eg: digital stories, recipe books, etc.)
If yes, please tell us about them and also attach a sample to your report.

Did you give away any materials (eg: books, food hampers, camera memory cards, etc.)

Please email at least one photo of an event, along with permission forms from everyone in the photo.



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Outcomes

What were some of the outcomes of your project? (i.e. people are more confident/ youth read more / youth cook more / participants read to their children more/ youth learned more about their culture, etc.)

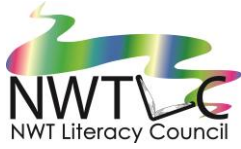
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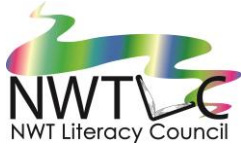
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Which of the 5 embedded literacy and essential skills activities worked best?

Why?

Which of the 5 LES activities was difficult to do?

Why?

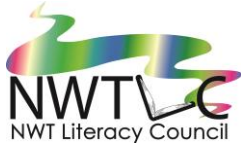


Report Form - Skill Builders for Youth 2017-2018

Additional comments or feedback for the NWT Literacy Council

Mandatory Evaluation:

Please make sure you have attached the evaluation forms before returning to the NWT Literacy Council.



Report Form - Skill Builders for Youth 2017-2018

Please fill in the total amounts in the spaces below. Please sign the form and send it back to the NWT Literacy Council.

Amount received	Amount spent
NWT Literacy Council \$	Space \$
Other (Please list and provide \$ figures or indicate 'in kind'.)	Salaries \$
1.	Honoraria \$
2.	Groceries \$
3.	Transportation \$
4.	Childcare \$
5.	Photocopying \$
	Materials (Books etc.) \$
	Advertising \$
	Supplies \$
	Administration costs \$
	Other costs (please list)
	1. \$
	2. \$
Total \$	Total \$

Signature: _____

Date: _____

NWT Literacy Council,
 Box 761
 Yellowknife, NT
 X1A 2N6

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 Toll free: 1-866-599-6758
 Fax: 867-873-2176
 E-mail: emily@nwtliteracy.ca