

**The San Jose (CA) Chapter of The Links, Incorporated**

**Program/Project Report Form**

Title of Activity:

Location:

Date/time:

Participating Facet/s:

Facet Co-Chairs:

Submitted By:

A.THE PROBLEM OR NEED ADDRESSED BY THIS ACTIVITY:

B. ACTIVITY DESCRIBTION (what we do):

C. PEOPLE SERVED (who did we reach):

NUMBER OF PEOPLE SERVED:  
 \_\_\_\_\_\_\_\_ Women

\_\_\_\_\_\_\_\_\_Men  
 \_\_\_\_\_\_\_\_ Children (ages 0-12)   
 \_\_\_\_\_\_\_\_ Teens (ages 13-18)  
 \_\_\_\_\_\_\_\_ Young Adults (ages 19-24)  
 \_\_\_\_\_\_\_\_ Senior Citizens  
 \_\_\_\_\_\_\_\_ Families  
 \_\_\_\_\_\_\_\_ Others - Please specify:   
 \_\_\_\_\_\_\_\_ Males (Total)  
 \_\_\_\_\_\_\_\_ Females (Total)

Total Number of People Served \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D. ETHNICITIES SERVED:

\_\_\_\_\_\_\_\_ American Indian or Alaska Native  
\_\_\_\_\_\_\_\_ Asian  
\_\_\_\_\_\_\_\_ Black or African American  
\_\_\_\_\_\_\_\_ Native Hawaiian or Other Pacific Islander  
\_\_\_\_\_\_\_\_ White  
\_\_\_\_\_\_\_\_ Hispanic or Latino  
\_\_\_\_\_\_\_\_ Other - Please specify

E. LIST LINK MEMBERS PRESENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL NUMBER OF LINKS PRESENT\_\_\_\_\_\_\_\_\_\_

F. RESULTS ACHIEVED, GOALS ACHIEVED:

G. PARTNERSHIPS (list and describe) sponsors, collaborators, donors

H. TOTAL COST OF THE PROGRAM/ACTIVITY: (Planned budget versus actual cost)

LIST / DESCRIBE IN-KIND DONATIONS:

J. SUMMARY:

What was the impact to the community?

Based on your planning, was activity conducted as planned?

Please submit this report upon completion of any chapter program or project. Please forward copies to Chapter President, VP of Programs,

Recording Secretary, and Archivist

NA

Updated 10/2017