



PRESBYTERY INITIATIVES PROJECT EVALUATION

To be completed within 8 months of the date of grant award.

3601 Seminary Avenue | Richmond, Virginia 23227 | 804 342-0016 |

Project evaluation

*From the objectives in your Grant Application, please indicate the outcome or status of the objectives.
Attach additional pages, if necessary:*

goal objective	outcome / status

Summary of expenditures

Attach a summary of expenditures detailing how the grant was used and forward to the Synod Office within 8 months after receipt of the grant award.

Certification

By signing below, I certify that the funds sent by the Synod of the Mid-Atlantic as described above were spent according to the grant's intention. If there is any addition information, please attach a separate page.

applicant signature: _____ date: _____

presbytery signature: _____ date: _____

Submit project evaluation

send completed project evaluation and supporting documentation to:

The Synod of the Mid-Atlantic
Attn: Presbytery Initiatives Committee
3601 Seminary Avenue
Richmond, VA 23227

tscott@synatlantic.org
804-342-0016phone
804-220-9360fax