Valley Alliance for Education
Imagine Innovate Inspire

Valley Alliance for Education
Creative Classroom Grants

# FINAL EVALUATION AND FINANCIAL REPORT FOR 2023-24 Grant Recipients

To be completed by the project director/teacher at the conclusion of the project, please **MAIL to VAE P.O. Box 515 Fishersville, VA 22939**
**by: April 15, 2024** photo's may be emailed to vae@lumos.net

**DATE RECEIVED**: August 2023 for the 2023-24 grant cycle.

**PROJECT TITLE:** _____

**PROJECT DIRECTOR:** _____

**SCHOOL:** _____

**NUMBER OF STUDENTS SERVED:** _____ **GRADE LEVEL(S):** _____

**ACADEMIC DISCIPLINE/SUBJECT AREA**: _____

_____

_____

1. **Describe briefly how your project accomplished your goals and objectives.**
2. **What advice would you give to other teachers who want to implement something similar in their classrooms/schools?**
3. **Other comments:** VAE welcomes any comments regarding the Creative Classroom Grants Program that will help us improve the process.

**Please include notes from students and photographs of activities that we may include on the VAE webpage, share with donors who support the VAE, and use for promotional purposes. Please have students sign only FIRST NAMES on all pictures and correspondence. Do NOT place dates on pictures or notes.** (The notes and photographs are extremely helpful! We send every donor a thank you note from a student, and we hope to put some of them in our newsletter and on our new website. For photos, please make sure all the students' pictures have a signed photo release on file! We would like to put photos of the grants in action on our website, and we also use them at our annual awards banquet and in the newsletter. Thank you for your help with this!)

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## Page 2 - FINAL FINANCIAL REPORT for 2023-24

PROJECT TITLE: _____

PROJECT DIRECTOR: _____School: _____

**Itemized Expenses**
**All receipts and/or invoices must be attached.**
**A check for the unspent balance must be attached to this report.**

| Materials & Resources | Cost | Purchase Date |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**Total Amount of Grant Award:** $_____

**Total Funds Expended:** $_____

**Difference:** $_____ **If this line is over $25.00 –**

This amount must be refunded to VAE with this report

Any unspent funds **greater than $25** (the difference) must be returned to VAE with this report unless prior approval for carrying over the funds has been received from VAE. The request for carry-over funds must explain why the project funds were not expended during the school year of the grant and how they will be used in the coming year. This request should be sent to Chair of the CCG Committee. The principal must initiate the request for carry-over of funds.

_____
_____
_____

**Submitted and approved by:**

Project Director_____ Date: _____

Principal: _____ Date: _____