

FOLLOW-UP REPORT FORM 2011-2012

<p>FOLLOW-UP REPORT SUBMISSION DEADLINE: By January 31, 2012</p>	<p>PLEASE SUBMIT TO: Program Administrator Community Recreation Development Grants Recreation and Sport Division Department of Tourism, Culture and Recreation 2nd Floor, West Block Confederation Building P.O. Box 8700 St. John's, NL A1B 4J6 Fax: 709-729-5293 E-Mail: jenniferbourne@gov.nl.ca</p>	<p>OFFICE USE ONLY: TRIM: _____ Grant No: _____ Consultant: _____ Date Received: Y/____M/____D/____</p>
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Please Note: Completing and submitting this Follow-Up Report is a condition of consideration of approval of funding for Fiscal Year 2012-13. Grants will not be approved, without exception or under any circumstances, for funding in Fiscal Year 2012-13 or subsequent years if the applicant has any outstanding follow-up reports from previous Community Recreation Development Grants.

Name of Lead Organization:			
*Recreation Committee Contact Name (Can be contacted concerning any questions or issues arising from this Follow-Up Report):			
Telephone (Home):	Telephone (Work):	E-Mail:	
Number and type of Recreation, Sport and Physical Activity Initiatives and Activities undertaken (Please list and briefly describe each initiative or activity. Where possible, please provide information concerning the age groups associated with each initiative or activity, for example Child (0-10 years), Youth (11-18 years), Adult (18+). Use separate sheets, if necessary.)			
Initiatives / Activities	Estimate # of Participants		
	Children	Youth	Adult
1.			

Number and type of Initiatives and Activities undertaken continued:			
Initiatives / Activities	Estimate # of Participants		
	Children	Youth	Adult
2.			
3.			
4.			
5.			
Comments: (Please use separate sheets if necessary)			
Inclusion of Under-Represented Groups. Please estimate the total number of persons participating in your programs representing the following categories:			
Category	Number	Category	Number
Women and Girls		Aboriginal	
Seniors		Persons with Disabilities	
Low Income		Other (for example, Youth-at-Risk)	
Was this an improvement over the number of persons in under-represented groups who participated in 2010-2011? (Please tick appropriate box). <input type="checkbox"/> More <input type="checkbox"/> Same <input type="checkbox"/> Fewer			
Comments: (Please use separate sheets if necessary)			
Special Events. Please list the number of Special Events held in your community. For example: Canada Day, Terry Fox Run, Winter Festivals and etc.			
Event	Estimate # of Participants		
	Children	Youth	Adults
1.			
2.			
Special Events Continued			

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Partnerships. Please list any partners who participated in your activities:

Partner Name	Amount of Contribution / In-Kind Contribution
1.	
2.	
3.	

What statement best describes your community?

Yes, my community is _____ in recreation /sport / physical activity / wellness initiatives and activities because of the Community Recreation Development Grants. Please tick appropriate statement that applies to your community.

Better served
 Somewhat better served
 Not better served

If better served or somewhat better served, please describe how your community is better/somewhat served. What were the main benefits of your Community Recreation Development Grant Funding on participation in, and access to, your recreation /sport / physical activity / wellness programs? If not better served, please explain why not.

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Any other comments? (Please use separate sheets, if necessary)

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FOLLOW-UP REPORT SUBMISSION

Please send this completed Follow-Up Report **on or before January 31, 2012** to:

Program Administrator
Community Recreation Development Grants
Recreation and Sport Division
Department of Tourism, Culture and Recreation
P.O. Box 8700, St. John's, NL, A1B 4J6
Fax: 709-729-5293
E-Mail: jenniferbourne@gov.nl.ca

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT:

David Doyle, Consultant
Dept. of Tourism, Culture & Recreation
P.O. Box 8700
St John=s, NL
A1B 4J6
Tel: (709) 729-5281
Fax: (709) 729-5293
E-Mail: daviddoyle@gov.nl.ca

Trevor Paine, Consultant
Dept. of Tourism, Culture & Recreation
P.O. Box 3014, Stn. "B"
Happy Valley-Goose Bay, NL
A0P 1E0
Tel: (709) 896-7251
Fax: (709) 896-0291
E-Mail: tpaine@gov.nl.ca

Dave Feener, Consultant
Dept. of Tourism, Culture & Recreation
P.O. Box 8700
St. John=s, NL
A1B 4J6
Tel: (709) 729-6291
Fax: (709) 729-5293
E-Mail: dfeener@gov.nl.ca

ACCESS TO INFORMATION AND PROTECTION OF PRIVACY STATEMENT

The Organization acknowledges and agrees that this Follow-Up Report Form and information regarding it are subject to the *Access to Information and Protection of Privacy Act* (ATIPPA) and that the Grantor may publicly disclose information in relation to this Agreement, including its terms and the details of the Organization, as authorized under the *Act*.

Any information provided by you to the Department of Tourism, Culture and Recreation can be accessed by you during standard office hours and updated by writing to the Recreation and Sport Division through the Department of Tourism, Culture and Recreation's Key Contacts listed above, or by calling the ATIPP Coordinator at (709) 729-6370. All information provided on this form and gathered throughout the

assessment process will be stored on a database that will only be accessed by authorized departmental personnel and is subject to privacy restrictions.

The Department of Tourism, Culture and Recreation may wish to provide certain information to the media for promotional purposes. The information will only include the organization's name, the grant amount and, if relevant, the programs, services and activities for which the grant will be used.