Title of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: (Please include name, office address, phone number, and email address)

Date of Event:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(REPORT DUE 30 WORK DAYS AFTER PROJECT)**

Please answer the following questions regarding funds that were awarded from the Equity and Access Committee. Please limit responses to one attached page.

1. What was the impact on the diversity goal?
2. What size of participation was achieved with this project?
3. What is the future of this activity? Do you have plans to make this a recurring event?
4. What would you do differently?
5. Please provide any other additional information.

Please use the table below to specify the use of the funds:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Equity and Access Committee  Funds | |  | Other Funds | |
| Category, activity, etc. | Amount spent |  | Category, activity, etc. | Amount spent |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total | |  | Total |  |

|  |  |
| --- | --- |
| Total Equity and Access Committee Funds |  |
| Other Funds |  |
| Total Spent |  |