



Youth Acceleration Grant Close out Form

This form must accompany the final grant request

Name of Organization _____

Address _____

FEIN _____

Period covered by this grant: (month/day/year)

From: / / To: / /

1. What activities did the grant support and what did the grant accomplish during the time period covered by the grant?

2. Were you able to carry out ALL planned project activities to which the grant pertained? If not, please explain.

- Beyond the project's direct accomplishments, what was the impact on - or benefit to - your community?

INDIVIDUALS BENEFITTED

Please provide counts for the youth who directly benefited by the grant funds. Leave blank any categories that are not applicable or for which actual figures/supportable estimates do not exist.

Pre-school	
Primary Grades	
Middle School	
High School	
Total (A)	

Provide geographic counts for the youth who directly benefited by the grant funds. Leave blank any categories that are not applicable or for which actual figures/supportable estimates do not exist.

Amelia Island (non Fernandina Beach)	
Bryceville	
Callahan	
Fernandina Beach	
Hilliard	
Rural	
Yulee	
Total – must agree with total A above	

Did any underserved youth benefit from these grant funds (choose all that apply and indicate total number of youth benefitted in that category)

	Youth with Disabilities
	Institutionalized Youth
	Youth below the Poverty Line
	Youth with Limited English Proficiency
	Youth at Risk

Signature of Authorizing Official: To the best of my knowledge and belief, the data reported above are correct and all outlays were made in accordance with grant conditions. Payment is due and has not been previously requested.

_____ Date: _____

Please attach this form to the final payment request and forward to: Parks and Recreation 2500 Atlantic Avenue Fernandina Beach, FL 32034 Attention: Scott Mikelson