

NC LTGTFC Grants Monitoring  
Grant Performance Evaluation Worksheet

Grantee:		Grant #:		
Date:		Contact Name:		
	<b>Grant Objective(s)</b> (list one per column putting in the description)			
<b>Criteria</b>	<b>1 [description]</b>	<b>2 [description]</b>	<b>3 [description]</b>	<b>4 [description]</b>
Expected Outcome (from agreement)				
Performance Measure (from agreement)				
Actual Results (Provide by documenting the Quantitative and/or the Qualitative Impact of the Grant Activities.)				
Testimonials from Individuals and Impacted Organizations- (Optional)				

**\*The Yellow highlighted area is information that should be completed and submitted with the initial Application Process. Form would be submitted with the Letter of Intent-(LOI)**

**\*Please attach additional sheets if necessary to complete the Criteria, including the Grant Name and Number at the top of each additional sheet.**

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**FOR COMMISSION USE:**

**Grant #** \_\_\_\_\_

Ways to Improve Performance?				
Expected Outcome Achieved of Key Activity?				
Recommend Continuation of Funding?	Yes	No (explain)		

Comments:	
Signature:	Date:

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<b><u>COLOR LEGEND:</u></b>	
<b>Yellow</b>	The Yellow highlighted area is information that should be completed and submitted with the initial Application Process. Form would be submitted with the Letter of Intent-(LOI)
<b>Blue</b>	The Blue highlighted area is the information that should be submitted with the grantees Final Written Report to be reviewed at the LTGTFC meeting.
<b>Pink</b>	The Pink highlighted area is to be completed at the first Full Commission Meeting for the final evaluation of the Project.

COMMISSIONER \_\_\_\_\_

WAYS TO IMPROVE PERFORMANCE

EXPLANATION PAGE