



Charity Registration Number: 1098235

## Grant Monitoring and Evaluation Form

Project  
Reference

Date Form Sent

Return By

Name of Organisation		
Purpose of Grant		
Name of Person Completing form		
Telephone		
Grant Year: (please select)	Grant Agreed (inc adjustments)	Grant Paid to Date:

<b>1. Has the whole grant awarded to your organisation been spent?</b> (Yes / No) <i>(we define money as spent when it has actually been paid out by you)</i>
<b>2. If no, please supply details of how much of the grant has been spent and the date by which the balance will be spent.</b>
<b>3. Please attach expenditure listing and receipts confirming expenditure as set out in the grant application (photocopies of originals are acceptable).</b>
<b>4. When will your Annual Report and Financial Accounts, showing the grant paid be available?</b>  Annual Report:  Audited Accounts:
Please ensure that copies of these documents are sent to the Trust as soon as they become available.

**5. Have you achieved the objectives set out in your original grant application? Please tell us about what you have achieved with the funding from Hillingdon Community Trust, and how you have met any key performance indicators set out in the grant offer.**

**(Please refer to your grant application form and to our grant offer when you complete this so that we can see that you have achieved what you intended to do when we provided the grant.)**

**6. Please tell us about any parts of the project which have gone particularly well.**

**7. Are there any aspects of the project which with hindsight you may have done differently?**

**8. How has the project been publicised?**

<b>9. Beneficiaries</b>		
Where is your Organisation based?		
Where was the project /activity located?		
How many people have benefited from the project / activity to date?		
How many of these people are resident in the six wards covered by the Trust?		
How many additional people will benefit from the project during the next twelve months?		
<b>Please indicate how many beneficiaries came from the following wards</b> <i>(insert number in box)</i>		
Botwell	Townfield	Pinkwell
West Drayton	Yiewsley	Heathrow Villages
Not recorded		
<b>Please tell us how many beneficiaries there have been from the project from each of the following age groups</b> <i>(insert number in the box)</i>		
Children	Young people	Adults
Seniors	All	Not recorded
<b>What was the ethnic grouping of the beneficiaries? Please tell us how many beneficiaries there have been from the project from each of the following ethnic groups</b> <i>(insert number in box)</i>		
Asian or Asian British	Black or black British	
European	Mixed heritage	
White	Chinese or Chinese British	
Any other group	Not recorded	
What steps did the project take to cater for people with disabilities?		
How many of the beneficiaries were people with disabilities? (insert number in box)		
<b>10. Has the grant received from Hillingdon Community Trust assisted you with fund raising from other sources?</b>		<b>(Yes / Possibly / No)</b>

**11. If yes, please tell us which organisation, the purpose of the grant, the total amount and the length of time it is for.**

Name of Funding Organisation and Purpose of Grant	Length of Grant (years)	Total Grant

**13. How have you celebrated the success of this project?**

**14. Is there any other feedback you wish to give the Trust on your project?**

## Feedback on Hillingdon Community Trust

Hillingdon Community Trust is a new organisation aiming to demonstrate best practice in all aspects of its work and to be responsive to the needs of local organisations. To assist us to do this we would appreciate your comments on our performance.

From your experiences how would you rate Hillingdon Community Trust?

	Very Good	Good	Fair	Poor	Very Poor
<b>Application Process</b>					
Overall Grant Application Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Guidance on Grant Applications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Layout and Complexity of Application Forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Trust Management and Procedures</b>					
Promptness of Responses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hillingdon Community Trust Website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Helpfulness of Trust Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grant Offer Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrangements for Payment of Grants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Monitoring and Evaluation Process</b>					
Complexity of this form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>Are there any other comments you wish to make?</b></p>          					
<p><b>We would appreciate it you would include any pictures you have of the projects. Can you please confirm that you are happy for us to we use them for publicity purposes? (e.g. the website, or the Trust annual report etc)</b>  <b>(Yes / No)</b></p>					
Signature of Person Completing this Form:			Date:		
Name					

Thank you for completing this monitoring form, please return to;

**Hillingdon Community Trust  
 Barra Hall  
 Wood End Green Road  
 Hayes UB3 2SA**