

TRAINING GRANT FINAL GROUP REPORT

Group: _____ **Site:** _____

Trainer: _____ **Animator:** _____

Date of completion: _____ **Date of final disbursement:** _____

Group Members: _____

1. Initial # members _____
 - # trainers(s) _____
 - # trainees _____

2. Successful
 - # members _____
 - # trainer(s) _____
 - # trainees _____
 - # trainees/ trainers, who dropped out _____
 - # members who repatriated _____

3. Money in hand: _____
Money out: _____

4. Materials out: _____
Materials in: _____

5. What needs to be done before graduation? How will you accomplish this?

Monitoring and Evaluation Officer's Comments:

Signature

Date