

For office use only:

Application # _____

Date turned in _____

Initials of person accepting application _____

UNIVERSITY OF MINNESOTA

2009-2010 Student Activities and Coca-Cola® Grants

Project Evaluation

Please return this completed form to Student Activities, 126 Coffman Memorial Union, 300 Washington Avenue, SE, Minneapolis, MN 55455. **This form must be completed and submitted within 30 days of completion of the project.** Failure to do so, will result in the loss of your award and potential additional consequences.

PERSONAL INFORMATION

Name of <i>Primary</i> Contact Person		
Student Group, Department, or Individual Name		Student Group ID #
Street Address		
City	State	Zip
Phone Number	Email	

PROJECT INFORMATION

Application Number-Must be listed, or paperwork will not be processed!					
Please list the amount awarded in each initiative:	Administrative \$	SSF Event \$	Coke Activity \$	Coke Development \$	Coke Academic \$
Name of Initiative					
Date(s) of Initiative			Location of Initiative		
1. Please estimate the number of participants:					
_____ Faculty					
_____ Non-University					
_____ Staff					
_____ Students – Undergraduate					
_____ Students – Graduate / Professional					
_____ TOTAL					

2. Describe the overall impact the initiative had on the University community.

3. Describe how your initiative promoted diversity on campus.

4. What worked well in the planning of your initiative?

5. What did *not* work well in planning your initiative?

6. What would you do to change or improve your initiative?

7. How would you restructure the Grants program to increase its effectiveness?