

**Local Social Justice Grant Report Form**  
**Final Report**  
**Deadline: Within 30 days of project completion**

|                                  |                           |
|----------------------------------|---------------------------|
| Date of report:                  | Name of applicant:        |
| Name of Local Association:       | Local Association number: |
| Name of Local President:         | Local President's phone:  |
| Local President's email address: |                           |
| Applicant's phone:               | Applicant's fax:          |
| Applicant's email address:       |                           |
| School name:                     |                           |
| School address:                  |                           |
| School phone:                    | School fax:               |

**Project title**

|  |
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|  |
|--|

**Project goals**

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|  |
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**Use of funds**

| Item  | Cost |
|-------|------|
|       |      |
| Total |      |

**Summary of the project—please include a description of each activity and outcomes.**

**Impact of project on the local**

For further information, please contact Todd Patrick, Assistant Director of Social Justice.

**Phone:** 604-871-1850 **Toll free:** 1-800-663-9163 local 1850 **Email:** [tpatrick@bctf.ca](mailto:tpatrick@bctf.ca)

Please consider submitting an article about your project for the *Social Justice Newsletter* to [tpatrick@bctf.ca](mailto:tpatrick@bctf.ca).