FollowUp Medina Foundation

# **RFP - Professional Development**

### Medina Foundation

### **Overview**

The Medina Foundation is pleased to support your work in professional development. As stated in the initial grant contract, we ask that you complete this status report after your professional development work is completed, or no later than the end of the following year. Your input helps inform our grantmaking as we continue to learn and work together.

Please note: 1) In consideration of your time and resources, we encourage you to keep your answers as concise as possible. 2) Please save your resources--do not send additional information such as DVDs, pamphlets, photos, etc. If you need to share any additional information outside the scope of this report, please feel free to email us at alexia@medinafoundation.org.

*Grant specifics* \*\*Note: these items carry over from original application.

### **Project Name**

Character Limit: 100

#### **Amount Awarded**

Character Limit: 20

### **Decision Date**

Character Limit: 10

#### Name of Executive Director

(at the time of this award)

Character Limit: 25

### **Primary Geographic Area**

### Choices

Clallam County

**Grays Harbor County** 

Island County

**Jefferson County** 

King County

**Kitsap County** 

Mason County

**Pacific County** 

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Pierce County
San Juan County
Skagit County
Snohomish County
Thurston County
Whatcom County

### **Secondary Geographic Area**

If your organization provides services in more than one county, please select the county in which your organization provides the most services after the primary county.

#### **Choices**

Clallam County
Grays Harbor County
Island County
Jefferson County
King County
Kitsap County
Mason County
Pacific County
Pierce County
San Juan County
Skagit County

Thurston County
Whatcom County

## Planned Objectives vs. Actual Outcomes

## What professional development are you requesting funding for? \*\* (denotes

### answer is carried over from original application)

This is how you described your original plan and objectives, as stated in your grant request. Consider the projected outcomes when considering the following questions.

Character Limit: 5000

## Please describe how your professional development work went. (required)

Share any highlights, learnings or other details about the process.

Character Limit: 5000

## If there were any changes to the proposed plan, please describe those changes

here. (required)
Character Limit: 5000

### What was the result of this work? (required)

How has it affected the participant(s) and/or the organization as a whole?

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## Planned vs. Actual Income & Expenses

## Will the amount you are requesting cover the full cost? \*\*

This is what was submitted in your RFP. ("Will the amount you are requesting cover the full cost? If not, how will you pay for the remaining amount?")

Character Limit: 5000

### Financial Narrative (required)

As you reflect on your original budget for this professional development opportunity, were there any changes?

Character Limit: 5000

## Feedback (optional)

## How would you rate your overall experience in this grantmaking process? (RFP)

On a scale of 1 to 7, with 1 = "Extremely Negative Experience" and 7 = "Extremely Positive Experience"

Scoring Options: 1 - 7

### Comments / Final Report feedback (RFP)

Please share any comments or suggestions for improvement of our overall processes and interactions with applicants. To provide feedback anonymously, please leave us a review on grantadvisor.org. *You may also contact us directly by emailing alexia@medinafoundation.org.* 

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