

**CHAPTER PARTNERSHIP GRANT
DE-BRIEFING FORM
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The purpose of this Partnership Grant De-Briefing Form is to evaluate what worked well, and maybe what didn't, in the planning and carrying out of your educational program. This review is meant to help your chapter and others chapters create even better programs for the future. We thank you for this assessment.

PLEASE NOTE:

In order to receive payment of grant, this completed form and a copy of the final invite, must be returned to the IFDA/EF Director of Scholarships & Grants as soon as possible after the event but no later than 60 days. The event must be completed, the Application and De-Briefing Forms received, and the award funds distributed all within the same calendar year.

* * * * *

Today's Date	Date program was held	Chapter
Chapter Address		
(Street)	(City)	(State/Zip/Country)
Chapter Contact(s): VP Events or Program:		
(Last)	(First)	(E-mail)
Phone: Home	Office	Cell
		Fax
VP Educ. Foundation (req):		
(Last)	(First)	(E-mail)
Phone: Home	Office	Cell
		Fax
Grant check (made out to your chapter) should be mailed to: Chapter name c/o:		
(Street)	(City)	(State/Zip/Country)

EVENT INFORMATION

Program Title
Day, Date and Time of Event
Location

INCOME & EXPENSES

Net income:
Projected expenses as indicated on the application:
Actual Expenses:

If there was a discrepancy between the Income & Expenses please indicate and briefly describe what expenses were not anticipated.

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ATTENDANCE

Projected Attendance on Application	
Actual Total Attendance	Actual Paid Attendance
Of the total attendance, approximately how many were—	
<input type="text"/> Members <input type="text"/> Non-Members <input type="text"/> Student Members <input type="text"/> Student Non-Members <input type="text"/> Comps <input type="text"/> Press <input type="text"/> Other	

If there was a discrepancy, please describe what factors likely affected attendance. Listed are several examples:

- | | |
|---|--|
| <input type="checkbox"/> Weather conditions | <input type="checkbox"/> Poor or no parking available |
| <input type="checkbox"/> Invitations sent too late for member long-range planning | <input type="checkbox"/> Not easily accessible by public transit |
| <input type="checkbox"/> Time of year (summer/vacation time) | <input type="checkbox"/> Ticket too expensive/cost |
| <input type="checkbox"/> Location | <input type="checkbox"/> Program apparently not of interest |
| <input type="checkbox"/> Too remote for most/inconvenient | <input type="checkbox"/> Other (please describe) |

PROGRAM

Who determined what the topic would be?

- | | |
|---|---|
| <input type="checkbox"/> Committee | <input type="checkbox"/> VP of Programs |
| <input type="checkbox"/> VP of EF | <input type="checkbox"/> Survey |
| <input type="checkbox"/> As a result of Strategic Planning and/or an established interest or need of membership | <input type="checkbox"/> Other (Please explain below) |

Why was this topic selected?

Did the speakers or program noted in the application change for the actual event? If yes, please explain below.

Were there any new members signed up, unexpected publicity or other positive (or negative) outcomes as a result of this event?

Mail or email the completed 2-page De-Briefing Form and a copy of the final invite to IFDA/EF Director of Scholarships & Grants: Sue Williams, Colleagues, 2700 East Grace Street, Richmond, VA 23223
colleaguesinc@earthlink.net