

**Better Together in a Box**

***End of Semester Report***

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Organization Name** | Click here to enter text. |
| **City/State of Organization**  | Click here to enter text. |
| **Program Supervisor** | Click here to enter text. |
| **Position at School/Facility** | Click here to enter text. |
| **Person Submitting Report** | Click here to enter text. |
| **Email for Report Submitter** | Click here to enter text. |
| **Phone for Report Submitter** | Click here to enter text. |
| **Name of Senior Facility/Group** | Click here to enter text. |

**PART A: To be completed by School Program Supervisor**

**Students Impacted by Program**

Number of students in program: Click here to enter text.

Names and Grade of students in program: Click here to enter text.

Number of seniors in program: Click here to enter text.

**Activity Recap**

Please list by **date** and briefly describe all activities, events and projects conducted during this program. In order to receive funding, teens must have convened online four times and there must have been four intergenerational touchpoints.

*Please attach digital files (jpg) of photos to illustrate the activities, projects, etc.*

*Example:*

*Teen meeting 1:* October 5, 2020, students met with teacher on Zoom and completed the first lesson in the curriculum on x, y, z, and spoke about a, b, c.

*Teen meeting 2:*

*Teen meeting 3:*

*Teen meeting 4:*

*Intergen’l meeting 1:* October 30, buddy boxes along with video cards were sent to seniors.

*Intergen’l meeting 2:* November 15, chair yoga session with teens and seniors on Zoom.

*Intergen’l meeting 3:*

*Intergen’l meeting 4:*

Click here to enter text.

**Impact**

Please provide example(s) that illustrate the impact your program has had on the students (*e.g.,* sensitizing students to the needs of seniors and instilling a sense of responsibility toward them, imbuing students with concrete understanding of *Kavod Avot,* recognition that they have as much/more to gain from seniors as they have to give, increased confidence in interactions with seniors) and on the seniors (*e.g.,* engagement and activity, feeling that they ‘matter’ and have much to contribute, amelioration of isolation, personal connections with students). Quotes and/or anecdotes are welcome.

Click here to enter text.

**Feedback**

Please provide us with your overall feedback, challenges, and recommendations, of implementing Better Together in a Box this term.

Click here to enter text.

**Budget**

Please indicate your expenditures over the course of the grant period. (We recommend sending an Excel spreadsheet with the below as a template.)

|  |  |  |  |
| --- | --- | --- | --- |
| **Categories - change according to your program’s original budget** | **Budgeted Amount** | **Actual Expenditures**  | **Explanatory notes re: expenditures** |
| Personnel Costs | Click here to enter text. | Click here to enter text. | Click here to enter text.  |
| Program Activity Expenses (materials) | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Program Activity Expenses (food) | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Other (please explain) | Click here to enter text. | Click here to enter text.  | Click here to enter text. |
| **TOTALS** | Click here to enter text. | Click here to enter text. | Click here to enter text. |

**PART B: To be completed by Senior Facility Program Supervisor**

|  |  |
| --- | --- |
| **Organization Name** | Click here to enter text. |
| **City/State of Organization**  | Click here to enter text. |
| **Program Supervisor** | Click here to enter text. |
| **Position**  | Click here to enter text. |
| **Person Submitting Report** | Click here to enter text. |
| **Email for Report Submitter** | Click here to enter text. |
| **Phone for Report Submitter** | Click here to enter text. |

**Seniors Impacted by Program**

Number of seniors in program: Click here to enter text.

**Impact**

Please provide example(s) that illustrate the impact your program has had on the seniors (*e.g.,* engagement and activity, feeling that they ‘matter’ and have much to contribute, amelioration of isolation, personal connections with students). Quotes and/or anecdotes are welcome.

Click here to enter text.

**Challenges or Obstacles**

Have there been any challenges or obstacles that have prevented your program from being implemented as described in your grant application (in terms of content, logistics, timing, inter-organizational relationships, etc.)? If yes, please describe – and indicate what mid-course corrections you are making in response.

Click here to enter text.

**Success Factors**

At this point, what do you see as the key factors that are needed for the success of this program?

Click here to enter text.