

**CAPCHP Alberta Coalition Network
Follow-Up Report**

*MUST be submitted within 1 month of the event or training date. Funding for future applications will depend on receipt of the follow-up report. **Email the completed report to crystal.nahaiowski@candorasociety.com**. If you have any questions, call 780-474-5011 ext. 104.*

Project Name: _____ Project Number: _____

Name of Conference/Workshop or Activity: _____

Submitted by: _____

Contact information (phone/e-mail): _____

Budget (Actual Funds Spent)

Category	Amount
<i>Registration</i>	
<i>Travel</i>	
Air	
Mileage (0.51/km)	
Taxi/Uber	
<i>Accommodation</i>	
Hotel/Motel	
Private (\$30/night)	
<i>Meals</i>	
Breakfast \$15/day	
Lunch \$18/day	
Dinner \$30/day	
<i>Hosted Events</i>	
Speaker/Facilitator	
Rent	
Food	
<i>Other (printing, training materials, etc.)</i>	
TOTAL	

If the balance remaining is less than \$100, submit receipts for how funds were expensed on relevant materials. If the balance remaining is over \$100 submit a cheque to:

The Candora Society of Edmonton
#262, 3210 - 118 Avenue
Edmonton, AB, T5W 4S9
Attn: Crystal Nahaiowski

Evaluation

(Please complete this section)

Workshop/Conference/Activity Name: _____

Date held: _____ Number of individuals from the project that attended: _____

Contact information for presentations: _____

Resources or website relevant to this conference/workshop or activity: _____

Rating:

On the following questions, rate the workshop/conference/activity from 1 (not recommended, not valuable, little skill) to 5 (highly recommend, very valuable, excellent skill)

	1	2	3	4	5
Would you recommend this to other projects?					
How valuable to your work was the activity/event/information?					
Please rate the presenters' overall skill, knowledge, and presentation.					

Comments:

How will your project and/or participants benefit from staff having attended this activity?

Please provide information you would like to share with others about this activity.