



COMMUNITY ENRICHMENT FOR KLICKITAT/SKAMANIA COUNTY

## Project Completion or Termination Form

**Project Name:**  
**Organization Name:**  
**Contact Person:**  
**Contact Phone/Email:**

Did you complete your project as planned or did you terminate it before completion?

**If complete:** On what date was the project completed?

Please describe the project outcome, both successes and challenges:

Did you have money remaining?    Yes    No

If so, what do you plan to do with it?

Do you anticipate a similar or other type of project in the future?

**If terminated:** On what date was the project terminated?

Please describe the reasons for termination:

Did you have money remaining?    Yes    No

If so, what do you plan to do with it?

Do you anticipate a similar or another type of project in the future?

Is there any feedback you'd like to give about working with CEKC?

**Thank you for your participation in CEKC!**

5/10/17