To : Commission on Children Secretariat 10/F, West Wing, Central Government Offices, 2 Tim Mei Avenue, Tamar, Hong Kong (Fax : 2523 1973)

Funding Scheme for Children's Well-being and Development Final Report

Project No.			
Name of Organisation			
Title of Project			
Project Objectives			
Details of Project (Please use separate sheets if space provided is insufficient)			
Activity (1)			
Name of Activity			
Date(s) of Activity			
Venue			
Description of the Activity			
Number of Participants	Target	Actual	
Activity (2)			
Name of Activity			
Date(s) of Activity			
Venue			
Description of the Activity			
Number of Participants:	Target	Actual	
	Name of OrganisationTitle of ProjectProject ObjectivesDetails of Project (Please use separate sheets if Activity (1)Name of ActivityDate(s) of ActivityVenueDescription of the ActivityNumber of ParticipantsActivity (2)Name of ActivityDate(s) of ActivityVenueDescription of the ActivityNumber of ParticipantsActivity (2)Name of ActivityDescription of the ActivityName of ActivityDescription of the Activity	Name of Organisation Title of Project Project Objectives Details of Project (Please use separate sheets if space provided is insufficient Activity (1) Name of Activity Date(s) of Activity Venue Description of the Activity Number of Participants Activity (2) Name of Activity Date(s) of Activity Description of the Activity Date(s) of Activity Description of the Activity Date(s) of Activity Description of the Activity Description of the Activity Description of the Activity	

Name of Activity		
Date(s) of Activity		
Venue		
Description of the Activity		
Number of Participants	Target	Actual
Activity (4)		
Name of Activity		
Date(s) of Activity		
Venue		
Description of the Activity		
Number of Participants	Target	Actual
Activity (5)		
Name of Activity		
Date(s) of Activity		
Venue		
Description of the Activity		
Number of Participants	Target	Actual
Overall Comments from Par (Please attach the Summary completed by participants)		opies of the questionn

7.	Assessment / Evaluation of the Project (Please give a brief account of the experience gained through organising the project, difficulties encountered and how they were handled, and any other comments. Please state how far the objectives of the project have been met.)		
Tel	me*: Post: I. No.:Official Fax No.: gnature:Date:		

* Name of authorised person of the funded organisation or officer-in-charge of the project