



Youth Engagement Grants Program

Youth Vibe Holiday Grants

Mini Grant Evaluation Form

Name of applicant/organisation:			
Postal address:			
Name of person organising the activity:			
Position title:			
Name of activity:			
Location of activity:			
Date/s of activity:			
Telephone:		Fax:	
Email:			

1.	Please provide a brief overview or description of the activity. Please attach additional pages if necessary.

2. Were young people actively consulted and/or involved in the planning and implementation of this activity? If so, how many and how?

3. How many young people participated in the activity?

4. Were any specific groups targeted for your activity/event eg specific age group, specific cultural background, specific interest?

5. Describe the feedback from the young people on their satisfaction with the activity.

6. How did you acknowledge the Northern Territory Government's sponsorship? What promotional material was produced and where was it distributed?
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7. Additional Comments?

Please send completed evaluations to:	
Post:	Hand delivery:
Youth Engagement Grants Project Officer Department of Health and Families PO Box 40596 CASUARINA NT 0811	Youth Engagement Grants Project Officer Department of Health and Families 4 th Floor Health House 87 Mitchell Street DARWIN NT 0800
Fax:	(08) 8999 3883

PRIVACY NOTICE

The Office of Youth Affairs is collecting the information on this form to evaluate your activity and the Youth Engagement Grants Program. Some of the information and any supporting documentation (including photographs), you provide may be used for promotional and reporting purposes.

The personal information you provide is able to be accessed and corrected if necessary by you or your nominated representative by application or request to the office. If you have any queries, please telephone the office on 08 8999 3862, email oya@nt.gov.au or by post to PO Box 40596, CASUARINA, NT 0811.