

Poetry Out Loud

FY2016 Final Report Form

Deadline: April 15, 2016

School name: _____

Contact person for this report: _____

Contact's phone number: _____

Contact's email address: _____

Number of children/youth engaged: _____ Number of adults/teachers engaged: _____

Number of artist(s) directly involved: _____

Did your school use any of its own financial resources to participate in POL? \$ _____

If so, please describe:

Population Benefited**For the next two sections, select all categories that, by the best estimate, make up 25% or more of the population that directly benefited from the program activities.****By Race:**

- | | | | |
|--------------------------|--|--------------------------|----------------------------|
| <input type="checkbox"/> | American Indian/Alaska Native (N) | <input type="checkbox"/> | Asian (A) |
| <input type="checkbox"/> | Native Hawaiian/other Pacific Islander (P) | <input type="checkbox"/> | Black/African American (B) |
| <input type="checkbox"/> | Hispanic/Latino (H) | <input type="checkbox"/> | White (W) |
| <input type="checkbox"/> | No single racial/ethnic group made up more than 25% of the population directly benefited (G) | | |

By Distinct Groups:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Individuals with Disability (D) |
| <input type="checkbox"/> | Individuals in institutions (includes people living in hospitals, hospices, nursing homes, assisted care facilities, correctional facilities, homeless shelters) (I) |
| <input type="checkbox"/> | Individuals below the poverty line (P) |
| <input type="checkbox"/> | Individuals with limited English proficiency (E) |
| <input type="checkbox"/> | Military veterans/active duty personnel (M) |
| <input type="checkbox"/> | Youth at risk (Y) |
| <input type="checkbox"/> | No single distinct group (G) |

As you reach the conclusion of your Poetry Out Loud funding period for 2016, please respond to the following statements on a maximum of two pages, placing the school's name in the top right-hand corner of each page.

1. Describe briefly how the program was implemented in your school.
 - Describe how the school benefited from the program.
 - Describe how you measured the impact of the program on all participants (e.g. teachers, students, and your community).
 - Describe the effectiveness of the teaching artist residency.
 - Describe how you will count the Poetry Out Loud program in your Arts and Humanities Program Review.

You may include any additional evidence of the impact of Poetry Out Loud such as brochures, pictures, newspaper articles, or programs from the school competition.

KAC Staff Use ONLY			
FY: 2016	APP #: _____	Grant Program: POL	
App Status: _____	App Institution: 23	App Discipline: 14	
Primary Outcome: C	Project Disc: 10D	Activity: 20	
# of Adults _____	# of Artist _____	# of Children/Youth: _____	
Pop benefited by age: 01	Race: _____	District Groups: _____	Arts Education: 01

I certify that I am legally authorized to submit this report on behalf of the grantee and that the foregoing statements and enclosures are true and complete to the best of my knowledge.

All signatures must be in red ink.

Preparer's Signature: _____ Date: _____

Printed Name: _____ Title: _____

Mail completed Final Report to:

Kentucky Arts Council
 21st Floor, Capital Plaza Tower
 500 Mero St.
 Frankfort, KY 40601-1987

502-564-3757
 Toll free: 888-833-2787