**Stepping Stones Project Self-Assessment**

Name of project

Name of your group

Your name

Contact phone number

E-mail

**Tell Us Your Story**

1. What was your project? What did you do?
2. Number of people who organized this project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Number of people who attended project event(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. How involved were you in community life before organizing this project?

Check one: Not at all \_\_ A little \_\_ A lot \_\_

1. How did you spend the Stepping Stones money?

|  |  |
| --- | --- |
| Item | Amount Spent |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| Total Stepping Stones contribution | $ |

1. What did the community contribute?
2. What did you learn about working in the neighbourhood/community?
3. What is your favorite story from this project?
4. How did your neighbourhood/community benefit from this project?

|  |  |  |
| --- | --- | --- |
| **Benefits to the Neighbourhood/Community** | **Yes or No** | **Comment or Example** |
| People *got involved who do not usually get involved* in community activities |  |  |
| People *met people* they didn’t know |  |  |
| Participants *reflected the age, cultural, and other diversities* of our community |  |  |
| People feel a greater sense of *belonging* in our community |  |  |
| People played *leadership roles* that were new to them (such as public speaking, project planning & volunteer management) |  |  |
| People feel *they can make a positive difference* in the community |  |  |
| People used *resources already* in our community (such as skills, ideas, money) |  |  |
| People brought *new resources* into our community |  |  |
| People were introduced to *ways to stay involved* in our community |  |  |
| People in our community are *planning further activities* *or next steps* |  |  |
| Other benefit(s)(Please describe) |  |  |

By submitting this form, you agree that Calgary Foundation can use information in this report to describe projects they have supported.

**Signed: Date:**