

FINAL REPORT - LONG
DM 2003 Project Completion Report
MM/DD/YYYY

To ensure accountability and to share lessons learned from the implementation of DM-funded projects with the public, we would like to ask you to fill out this Project Completion Report within three months of the completion of the funding period. Per our usual procedures, we will ask each Project Liaison to review the Report and will post it on the Development Marketplace website at www.developmentmarketplace.org

If you would like to provide information that should be off the record, you may do so in section VI. Information provided in this section will be handled as confidential without public exposure.

In addition, in accordance with Paragraph 3.1.1 of the Project Agreement, please attach a statement of account showing the use of the entire amount of the fund. Please also provide a one-page summary of your project, which includes 1) brief background of the issue(s) addressed by your project, 2) major achievements during the implementation, and 3) envisaged next steps and involvement of new partners. We will use this material to continue to disseminate your project idea to interested development partners.

I. Background Information

DM Project Number and Title	
Report Author's Name (if different from Team Leader)	
Total Award Amount	US\$ 000,000

In what ways is your project's concept or central idea innovative? Please indicate the **two** most appropriate categories from the list below.

Innovation	To select, double-click the appropriate box and set the "Default Value" to "Checked"
Newly targeted beneficiary group	<input type="checkbox"/>
Newly chosen geographic area	<input type="checkbox"/>
New use of technology	<input type="checkbox"/>
New combination of existing processes or technologies used	<input type="checkbox"/>
Old technologies used for a new purpose	<input type="checkbox"/>
New delivery method or support process employed	<input type="checkbox"/>
New financing method used	<input type="checkbox"/>
New partners or entities delivering services or producing goods	<input type="checkbox"/>

II. Project Achievement

i) Describe the project's overall success making a reference to the milestone objectives negotiated with your Project Liaison at the beginning of the implementation.

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ii) What were the few major activities (outputs) to carry out this project? What were the few most significant results of your activities (outcomes)?

Major Outputs:	Significant Outcomes:

iii) Were there any unexpected achievement/opportunity? (fill in the box below)

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iv) Were there any unrealized activities stated in the Project Agreement?

- Yes No

If Yes, how did this affect the overall impact of the project?

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v) What were the major obstacles your team faced during the implementation? What, if any, adjustments did you make to your original business plan in order to overcome the obstacles?

Obstacles:	Adjustments:

vi) How did the obstacles and the adjustments affect the overall success of the project?

Effect on Success:

vii) Evaluate the overall achievement of your project during the DM grant period in the scale of 0-100 (0 as the lowest and 100 as the highest)

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III. Ancillary Achievement

i) Dissemination of your project's findings and outcomes plays a key role to bring in partners and to bring the project to the next level. Were you successful with disseminating your project's findings and outcomes after the project completion?

Yes No

If Yes, please specify how and with whom you have shared the knowledge with.

ii) Has your organization allied with new partners and/or do you have any prospective partners to carry on the project beyond the DM's funding period?

Yes No

If Yes, specify the name of the partner, type of the organization, type of partnership, and monetary amount of support.

Partner's Name	Type of the Org	Type of Partnership (financial, implementation, in-kind)	Amount Funded or Committed (in US\$)

IV. Looking Forward

i) Have you already prepared a business plan for the coming year?

Yes No

If Yes, please list key activities planned for the coming year and tell us who will support the activities.

ii) Do you have any concerns about continuing this project for the next couple of years?

Yes No

If Yes, what are the concerns and how do you plan on addressing them?

V. Other Comments/Information Update

i) Do you have any comments or recommendations on the overall process and support provided by the DM Team or Project Liaison? Feel free to add any other information you would like to bring to our attention.

ii) If your contact information has changed, please provide us with the new information.

Contact Name:	
Title:	
Organization:	
Primary Email Address:	
Secondary Email Address:	
Organization's Website	
Phone:	
Fax:	
Address:	
Postal Code:	

VI. Confidential Report

Please provide, if any, sensitive comments or requests in the box below. Information provided in this section will be handled as confidential and will not be publicly posted on the DM website.

VII. Project Expenses Report

Please attach an expenses report as an Appendix to this report.

VIII. One-Page Project Summary

We would like to create a one-page summary of your project so that we can share your project's idea and achievement with our development partners. There is no set format for the summary, however, please be sure to include 1) a brief background of the issue addressed by your project, 2) major achievements during the implementation period, and 3) anticipated next steps and involvement of new partners. You may attach the report as an Appendix to this report.

Thank you for your time to fill out this report. It was truly a great pleasure to serve your team in the past year. Please keep us posted on your new challenges and success. We wish you every success in your activities.

For Internal Use Only

Approved by Project Liaison

[Redacted]

(Type)

[Redacted]

(Signature)

Date

[Redacted]

Received by DM Team

[Redacted]

(Type)

[Redacted]

(Signature)

Date

[Redacted]