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**Impact Report**

**Date Report was Submitted:**

**Name of Organization:**

**City and State of Organization:**

**Name of Program/Project:**

**Primary Contact Person for this Impact Report:**

If the primary contact has changed, please check here.[ ]

**Primary Contact** **Email:** **Phone #:**

**Grant Amount:** $ **Grant Expiration Date:**

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Please respond to each of the following questions. *Your responses should focus on the specific portion of the project or program that was funded by the Boston Scientific Foundation*.

1. **Referring to the goals and objectives described in your original Boston Scientific Foundation grant request, please indicate the following as related to the specific program we funded:**
* How many people were impacted?
	1. % were economically disadvantaged
* What were your major accomplishments? How did it measurably improve health and/or open educational opportunities?
* What were the key lessons or unexpected results and how will you act on that going forward?
* Were there any setbacks, how were they addressed and how did you update process?
1. **What methods were used to measure and evaluate the program’s success? Please use numbers/graphs and describe the methods of measurement for the program we helped to fund** (help us understand the impact of our $)**.**
2. **Are there any stories (and photos) specific to this grant that you’d be willing to share either with our internal employees or on our external website? If so, please include.**

**Finance/ Budget Report:**

Please attach a complete detailed report indicating how the grant award from the Boston Scientific Foundation was utilized and complete the budget detail below.

* 1. Salaries: $
	2. Equipment/ Supplies: $
	3. Transportation: $
	4. Recipient Financial Assistance (e.g. program scholarships): $
	5. Other: $

**To submit, email an electronic copy to:** **bscifoundation@bsci.com***.*