**First Nations Health and Science Related**

**Career Promotion Program (FNHSCP)**

# 2022-2023 Final Report Template

**Applicant Information:**

|  |  |
| --- | --- |
| Band or School Name: |  |
| Contact Name: |  |
| Contact Email: |  |
| Mailing Address: |  |
| Telephone: |  |
| Fax: |  |

**Actual Project Activity Type/Project Title:**

What activity did you complete from the options below?

|  |  |
| --- | --- |
| **Completed Project Activity Type** | **Completed Project Title** |
| **EXAMPLE:** | **‘Science Tutor Sessions after School’** |
| Arranged a health/science career fair |  |
| Arranged a health/science career planning session |  |
| Guest speaker or mentor program |  |
| Arranged health/science camp or club |  |
| Arranged tutoring opportunity |  |
| Hosted a health/science presentation |  |
| Other activity or session |  |

**Project Start and End Date:**

|  |  |
| --- | --- |
| Start Date |  |
| End Date |  |

**Final Participant Numbers:**

|  |  |
| --- | --- |
| **Grade** | **Number of Participants** |
| Elementary |  |
| Secondary |  |
| Other |  |

**Completed Activity Description**

Provide a brief description of the completed activity. Ensure you include specific details on how your project encouraged students to consider health and science related careers in a positive way.

**Completed Results/Deliverables:**

Please describe your completed results/deliverables and how the activity inspired students to pursue health and science related education and career opportunities.

**Actual Expenditure**

Please itemize your final costs:

|  |  |  |
| --- | --- | --- |
| **Expense** | **Amount** | **Explanation of Expense** |
| Example: Facility Rental | $700 | Full day room rental |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total:** |  |  |

Eligible costs include items such as facility rental, materials and supplies, fees for guest speakers, student transportation, admission fees, etc.;

Ineligible costs include infrastructure or equipment purchases (e.g. computers).

**Project Partners**

Final budget below can indicate any other sources of funding or support accessed to aid with the completed activities above.

|  |  |  |
| --- | --- | --- |
| **Partner Name** | **Amount** | **Explanation** |
| Example: First Nation Band | **$350** | Band covers deficit left after FNESC grant |
|  |  |  |
|  |  |  |

Thank you for your completed 22-23 FNHSCP Final Report

Final Reports Deadline: **Monday, May 22, 2023.**

Submit via email to: [soniao@fnesc.ca](mailto:soniao@fnesc.ca) or by fax to 604-925-6097.