# Social Impact Accountability Report

Completion of the Social Impact Accountability Report is a pre-requisite to receiving future grants from the Catholic Caring Foundation (“CCF”). Please complete the following and enclose a copy of your latest Annual Financial Statements (OR your Annual Report **containing** your latest set of annual Financial Statements).

Due date: **Wednesday 24 February 2021.**

1. **Your Details:**

|  |  |
| --- | --- |
| Organisation’s Name: |  |
| **CCF Number:** |  |
| **Grant Amount: $** |  |
| Contact Name: |  |
| Contact Designation: |  |

1. **Outputs:**

|  |  |
| --- | --- |
| In your 2020 grant application how many individuals and/or families did you **intend** to support? | Individuals:  Families: |
| How many individuals and/or families did you **actually** support? | Individuals:  Families: |

If appropriate, please record below, your reason for changes between intended numbers and actual numbers.

|  |
| --- |
|  |

In the box belowplease record any other key metrics used to measure the outputs of your organisation.

|  |  |
| --- | --- |
| Describe the Measure | Number |
| *Examples: number of seminars; number of food parcels; number of trips;* | *500* |
|  |  |
|  |  |

1. **Outcomes Achieved:**

In the box below please record the outcomes achieved by the families or individuals you have supported:

|  |  |  |
| --- | --- | --- |
| Outcome | How measured? | What was achieved |
| *Example: Feels confident about dealing with unsafe situations;* | *Feedback Survey* | *80% said Yes* |
| *Example: Entered into full time employment* | *Follow up telephone call* | *65% are in employment* |
|  |  |  |
|  |  |  |

1. **Impact Case Study:**

The Catholic Caring Foundation wishes to share your work with the Foundation’s donors. In the box below, or in a separate document, please provide an example of how your organisation’s involvement has improved the life of an individual or family. (Please do not use real names or include information that enables the individual or family to be identified.)

|  |
| --- |
|  |

1. **Expenditure:**

|  |  |
| --- | --- |
| Have you fully spent the grant? | **Yes / No** |

**If not, why not?**

|  |
| --- |
|  |

1. **Please include the following information with your report:**

|  |  |
| --- | --- |
| Have you included a copy of your latest set of annual Financial Statements (OR your Annual Report **containing** your latest set of annual Financial Statements)? | **Yes / No** |

1. **Acknowledgement:**

|  |  |
| --- | --- |
| Did you acknowledge the CCF grant in your annual financial statements? | **Yes / No** |
| Have you recorded the CCF as a supporter on your website? | **Yes / No / NA[[1]](#footnote-1)** |

1. **Signature:**

Please sign & date the report

|  |  |  |  |
| --- | --- | --- | --- |
| ***Signature:*** |  | ***Date:*** |  |

**Thank you:**

The Catholic Caring Foundation thanks you and your organisation for your work and for the help and support you give our communities. You have helped us distribute the donations of Catholics and others in the Auckland Diocese in an efficient manner so as to benefit the greatest number of individuals and families.

Please complete and return this report **BY EMAIL** to [info@caringfoundation.org.nz](mailto:info@caringfoundation.org.nz) , along with a copy of your latest Annual Financial Statements (OR your Annual Report **containing** your latest set of annual Financial Statements) to us by **Wednesday 24 February 2021.**

***The*** ***Catholic Caring Foundation***

*Private Bag 47904*

*Ponsonby*

*Auckland 1144*

1. NA = Not Applicable as we do not have a website [↑](#footnote-ref-1)