

Final Summary on Classroom Mini-Grant

Revised 11/2020

Email the completed form to wctl@utc.edu.

Primary Recipient Name: _____

Grant Title: _____

Department: _____ **Email:** _____

Please attach name and contact information for additional grant members, if applicable.

1. Summarize how funding was used.

2. List all expenditures.

Primary Recipient Signature

Date