



PARTNERSHIP PROGRAM

FINAL REPORT

This box to be filled out by staff:	
Fiscal Year:	Project Number:

Country: _____

PCPP Project Title: _____

Community Organization: _____

Project Implementation Period: Start Date: _____ End Date: _____

Volunteer Name(s): _____ COS Date: _____

Peace Corps Sector Assignment: _____
(*ex. TEFL, SBD, Environment, Health, etc*)

	Male	Female	Boys	Girls	Total
# of Participants: those persons <i>directly</i> involved in the design and implementation of the project					
# of Beneficiaries: those persons <i>directly</i> impacted by the project					

Amount of PCPP Funds Received: \$USD: Local Currency:

Amount of PCPP Funds Remaining: \$USD: Local Currency:

*Any remaining funds should be given directly to the AO at post and returned to OPSI

Please give a detailed account of your expenditures to date on a *separate sheet*. Indicate what items were purchased with PCPP funds and what was purchased with the community contribution. Please present receipts to your administrative officer.

Example Budget:

Currency Exchange Rate: 2 Pesos = 1 US Dollar

Partnership Contribution

Material	Unit	Quantity Needed	Unit Cost (pesos)	Total Cost (pesos)	Total Cost (USD)
Item 1					
Item 2					
Total					

Community Contribution

Material	Unit	Quantity Needed	Unit Cost (pesos)	Total Cost (pesos)	Total Cost (USD)
Item 1					
Item 2					
Total					

Total Project Costs

	% Contribution	Total Cost (Pesos)	Total Cost (USD)
Partnership Contribution			
Community Contribution			
Total			

PLEASE DO NOT LIMIT YOUR SELF TO THE SPACE PROVIDED. TEXT BOXES WILL EXPAND TO MEET YOUR SPACE REQUIREMENT FOR EACH NARRATIVE.

1.	<p>What happened during the project? What were the goals and objectives of the project? Please describe any changes in the project objectives. Did the community reach the goals of the project? If not, why?</p>	
2.	<p>How did the project build capacity? What new skills have been acquired by community members and/or their organizations? (Also update the indicators of success you outlined in the PCPP project proposal and be specific.)</p>	
3.	<p>How will community members apply their new skills or otherwise sustain the benefits of the project? How will they cover any recurring costs?</p>	
4.	<p>What unexpected events (positive or negative) did you encounter during the project? Based on your experiences, do you have any recommendations for other communities implementing a similar project?</p>	

Peace Corps Volunteer's Signature

Date

Administrative Officer (AO) certifies that all receipts are present and fiscal accounting is accurate.

Administrative Officer's Signature

Date

Country Director (CD) has reviewed and approved the final report for submission.

Peace Corps Country Director's Signature

Date

*If you have photos you would like to share with the Peace Corps Partnership Program, please complete the authorization form at the end of this document and include the photos with your final report.

Appendix B
Peace Corps Partnership Program – Optional Exit Survey

Country: _____

PCPP Project Title: _____

Volunteer Name(s): _____

Peace Corps Sector Assignment: _____

(ex. TEFL, SBD, Environment, Health, etc)

The Peace Corps Partnership Program thanks you for your participation. We would greatly appreciate your feedback regarding your experience and interaction with PCPP. By filling out this optional survey, you can help PCPP better serve Peace Corps Volunteers. This is your opportunity to provide feedback about the PCPP application process. Please answer all questions to the best of your ability and include this survey with your PCPP Final Report. Use the space provided at the end of the survey to make any recommendations or suggestions about the Program. Thank you!

1. How satisfied were you with the PCPP application process? *(mark one of the following)*

- Very Satisfied
- Satisfied
- Neutral
- Dissatisfied
- Very Dissatisfied

2. Did you attend a Project Design and Management (PDM) workshop? Yes No

If yes, did you find this workshop helpful? Yes No

3. Did you receive advice or support from staff during proposal development and the application process?

Yes No

4. How did you first hear about the Partnership Program?

IST MST Other:

4. Please use the space below to provide information on how you feel we can better improve our program:



Appendix C

Office of Press Relations Authorization to Use Personal Material

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In particular, I hereby authorize the Peace Corps to use, reproduce, or publish any or all of the above-listed items and to make reference to me in connection with these items to promote the Peace Corps using various media and publicity means, including, but not limited to: websites; books; public service advertising on television and radio stations; television and radio broadcasts; direct mail pieces; print advertisements; brochures; flyers; posters; articles; editorials; speeches; roundtable discussions; radio interviews; and television programs.

I acknowledge that I will receive no compensation from the Peace Corps in consideration of this Authorization or the use of the above-listed items pursuant to this Authorization.

Name

Signature

Date