# ARTIST-IN-SCHOOL SCHEME (AISS) MID-TERM REPORT

The Mid-Term Report is to be submitted by schools at the mid-point of the project. Please refer to the Letter of Agreement for the date the report is to be submitted.

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| **School Name:** [If applicable] If this is a **combined-schools project**, please list partner schools here: |
| **Project Title:** |
| **Name of Artist/ Arts Group:**  [If applicable] Please indicate name of Assistant(s): |
| **Project Duration:** *E.g. March 2025 to November 2026* |
| **Details of Sessions (Students)**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | **No.** | **Target Profile** | **No. of Students** | **No. of Sessions** | **Length of Each Session** | **Frequency of Sessions** | **Project Period** | |  | ***E.g.*** | *3 classes of Year 3 Art Students* | *25* | *20 sessions* | *1 hour* | *Weekly* | *Feb – June 2025* | | **Year 1** | **1** |  |  |  |  |  |  | | **2** |  |  |  |  |  |  | | **3** |  |  |  |  |  |  |   **Details of Sessions (Teachers)**  **Number of sessions and duration of each session:**  **[Year 2]** Please indicate if there are any changes to the **details of the sessions** (e.g. no. of sessions) in Year 2 of the project from what was submitted at application.  No change  If there are changes, please indicate the changes and reasons for the changes: |
| **Participation in Project** |
| What was the total number of participants in Year 1?  1. Students: 2. Teachers: 3. Others (E.g. parents etc.):   If number of students/ teachers is less than what is indicated in the Letter of Agreement, do outline the reasons for the reduction. Please also state if learning objectives were/ were not impacted:  **[Year 2]** Please indicate if there are any changes to the **participation numbers** (i.e. no. of students/ teachers) in Year 2 of the project from what was submitted at application.  No change  If there are changes, please indicate the changes and reasons for the changes: |

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| **Project Expenditure** |
| Please list a breakdown of the cost incurred for this project for Manpower and Material costs. Do add on rows as needed. Examples are included for your reference. **Do highlight unexpected costs incurred, if any.**  **Please do not remove or replace the table.**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Year 1** | **Manpower costs** (e.g. artist, assistant) | Artist fees per hour | No. of contact hours | | Total cost | |  |  |  | |  | |  |  |  | |  | | **Total manpower costs** | | | |  | |  | | | | | | **Material costs** (e.g. clay, paint, oil pastels, rental of instruments) | Unit Price | Quantity | Total cost | | |  |  |  |  | | |  |  |  |  | | | **Total material costs** | | |  | | |  | | | | | | **[Year 1] Total Project Cost (Manpower costs + Material costs)** | | |  | |   If total number of **artist contact hours/ sessions** is less than what is indicated in the school’s application, do outline the reasons for the reduction. Please also state if learning objectives were/ were not impacted:  **[Year 2]** Please indicate if there are any changes to the **project cost** (e.g. manpower or material costs) in Year 2 of the project from what was submitted at application.  No change  If there are changes, please indicate the changes and reasons for the changes: |

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| **Submitted by:** |
| **Designation:** |
| **Mobile No.:** |
| **Email:** |
| **School Leader’s name and signature:** |