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**CAPABILITY DEVELOPMENT GRANT**

**Project Report Guidelines for Organisations**

Congratulations on completing your project! Your Project Report will assist NAC to better understand your project, its outcomes and how we can improve this grant to better support the professional development for you and your peers.

**How to submit your Project Report**

Please submit this project report to the manager in charge of your application. You can refer to the Letter of Offer for the contact details.

**Submission Checklist**

Your Project Report should contain:

|  |  |
| --- | --- |
|  | Organisation’s Evaluation Report and Survey  *(Pages 2 to 5)* |
|  | Financial Report  *Organisations that receive* ***a single grant equal to or above $10,000*** *must submit Statement of Accounts certified by an accountant registered with the Institute of Singapore Chartered Accountants (ISCA) or equivalent international body* |
|  | Any Other Documentation / Materials Specific to Your Activity  *(e.g. photographs, transcripts, certificates, mentors’ report, etc.)* |

Your organisation is also encouraged to use the sample survey form in [Annex A](#_Mentor’s/Supervisor’s_Report_for) (Page A1 to A4) to gather feedback from participants of the training activity or programme. However, if your organisation wishes to use your own feedback form, please attach the template in your report submission. NAC may require your organisation to submit a sample of completed survey forms.

**Organisation Evaluation Report and Survey**

*This report is for all organisations that have received a Capability Development Grant from the NAC.*

*There are four sections to this report which will take approximately 15 to 20 minutes to complete.*

|  |  |
| --- | --- |
| Activity/Programme Name: | Click here to enter text. |
| Application Ref ID: | Click here to enter text. |
| Grant Recipient Name: | Click here to enter text. |

**Part 1: Organisation’s Evaluation Report**

Q1.1 Describe how the activities and programmes that the participants were involved in have helped your organization meet its capability development objectives.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q1.1.1 | Overall, the activity or the programme has met my capability development objectives. |  |  |  |  |  |

Q1.2 How do you see the participants applying what they have learnt to their work with your organisation?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q1.2.1 | Overall, the activity was relevant and valuable for the development of my organisation. |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Key Statistics** | | |
| Q1.3 | Number of participants | Click here to enter text. |
|  | | |
| Q1.4 | Number of trainees hired to work for your organisation since completing the programme | Click here to enter text. |
|  | | |
| Q1.5 | Number of new works created | Click here to enter text. |
|  | | |
| Q1.6 | Number of cities visited | Click here to enter text. |

**Part 2: Summary of Participants’ Feedback**

*Your organisation is required to ask the participant(s) for feedback on the training activity or programme and to summarise their feedback in this section of the report.*

*Your organisation is encouraged to use the survey form attached in Annex A to gather feedback from participants. However, if your organisation wishes to use your own feedback form, please attach the template in your report submission. You may also be required to submit a sample of completed survey forms.*

|  |  |  |
| --- | --- | --- |
| Q2.1 | Number of survey respondents | Click here to enter text. |
|  | | |

|  |  |
| --- | --- |
| Q2.2 | Based on participants’ feedback, which aspects of the activity or programme were done well? |
| Click here to enter text. | |

|  |  |
| --- | --- |
| Q2.3 | Based on participants’ feedback, which aspects of the activity or programme should be improved? |
| Click here to enter text. | |

|  |  |
| --- | --- |
| Q2.4 | Does your organisation have any comments about the participants’ feedback? |
| Click here to enter text. | |

**Part 3: Organisation’s Feedback on CD Grant**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q3.1 | My organisation would not have been able to organise this training activity or programme without the support of the NAC through the Capability Development Grant |  |  |  |  |  |
| Q3.4 | The availability of the Capability Development Grant has encouraged my organisation to organise more professional development activities for our staff and/or members |  |  |  |  |  |
| Q3.5 | Do you have any comments or feedback about the grant application process or how the NAC can better support your organisation’s capability development? | | | | | |
| Click here to enter text. | | | | | | |

**Part 4: Respondent’s Information**

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Designation or Occupation | Click here to enter text. |

**End of Organisation Evaluation Report and Survey**

## **Participant Self-Evaluation Report and Survey**

*This survey is for all participants of the training activity or programme supported by the CD Grant*

*There are three sections to this report which will take approximately 5 to 10 minutes to complete.*

|  |  |
| --- | --- |
| Activity/Programme Title: | Click here to enter text. |
| Organised by: | Click here to enter text. |
| Date(s): | Click here to enter text. |

**Part 1: Self-Evaluation Report**

Q1.1 Briefly describe the activities and programmes that you were involved in and how they have helped you meet your capability development objectives.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q1.1.1 | Overall, the activity or the programme has met my capability development objectives. |  |  |  |  |  |

Q1.2 How do you see yourself applying what you have learnt to your current work in the arts and culture sector?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q1.2.1 | Overall, the activity was relevant and valuable for my developments as a professional in the arts and culture sector. |  |  |  |  |  |

Q1.3 With what you have learnt, how do you see yourself contributing to Singapore’s the arts and culture sector in other ways?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | |
|  |  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| Q1.3.1 | What I have learnt has enhanced my employment opportunities in other areas of Singapore’s arts and culture sector |  |  |  |  |  |

**Part 2: Programme Survey and Feedback**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **N/A** | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| **Programme Evaluation** | | | | | | | |
| Q2.1 | The programme met my expectations |  |  |  |  |  |  |
| Q2.2 | The programme is well structured and of good quality |  |  |  |  |  |  |
| Q2.3 | The pace of the programme was good |  |  |  |  |  |  |
| Q2.4 | The quality of materials presented aided my understanding |  |  |  |  |  |  |
| Q2.5 | The duration of the programme was appropriate |  |  |  |  |  |  |
| **Instructor Effectiveness** | | | | | | | |
| Q2.6 | The instructor/trainer was knowledgeable about the subject matter |  |  |  |  |  |  |
| Q2.7 | The instructor/trainer was a good presenter and was able to communicate ideas and concepts clearly |  |  |  |  |  |  |
| Q2.8 | The instructor/trainer provided practical and useful examples to demonstrate ideas and concepts. |  |  |  |  |  |  |
| **Instructor Effectiveness** | | | | | | | |
| Q2.9 | I would recommend this programme to my peers. |  |  |  |  |  |  |
| Q2.10 | Do you have any other feedback for this programme? | | | | | | |
| Click here to enter text. | | | | | | | |

**Part 3: Respondent’s Information**

Your information will be kept strictly confidential. We may contact you in due course to invite you to respond to a follow up survey as well as the Arts and Culture Employment Survey.

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Designation or Occupation | Click here to enter text. |
| Organisation (if applicable) | Click here to enter text. |
| Number of years working in the arts | Click here to enter text. |
| Email Address | Click here to enter text. |

**End of Survey**