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**2020 ACSM Regional Chapter Grant Summary Report**

**(Due March 1, 2021)**

**Background Information**

In 2020, your regional chapter received grant funding from ACSM as approved by the ACSM Board of Trustees. As part of the application, all ACSM Regional Chapters agreed to submit a year-end summary report to outline how the funds were spent.

Information from the summary reports will be assembled into a formal report to the ACSM Board of Trustees. These yearly reports will be used to make a case to the ACSM Board of Trustees for extending the funding program into the future. As such, please answer the questions below thoroughly and be sure to show how the funding helped your regional chapter to expand innovative new programs and/or advance activities that are consistent with ACSM’s overall strategic priorities as outlined in your chapter’s initial application(s).

Please submit your regional chapter’s summary report no later than March 1, 2021. Questions should be sent to Heather Turner, ACSM Director of Chapter Services, at hturner@acsm.org.

**Summary Report for Grant #1**

**Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Program Overview-**Please provide a brief description of the program/activity that was supported by the grant.
2. **Activity Priority Area for which the Grant was Submitted:**

\_\_\_\_\_\_ ***Capacity & Infrastructure Building*** - Activities & programs within this category should be related to improving

 operations, sustainability and institutional strength of your Regional Chapter. Examples might include: technology

 improvements, administrative improvements, projects that lead to long-term financial stability, etc.

\_\_\_\_\_\_ ***Grass-roots Activation of ACSM National Projects & Programs-*** Activities and programs within this category should be

 related to grass-roots efforts related to ACSM National programs such as Exercise is Medicine®, Designed to Move,

American Fitness Index, ACSM Advocacy efforts, Media Leadership or other projects & programs specifically outlined in the SOAR Strategic Planning document.

\_\_\_\_\_\_ ***Innovation with High-Impact & Sustainable Potential-*** Activities and programs within this category should be those that

 showcase innovation and offer high-impact solutions in areas such as education, meetings, student engagement, member

 recruitment & retention, diversity initiatives, leadership development, etc. When appropriate, the proposed projects should

 align with similar priorities at the National level as outlined in the SOAR Strategic Planning document.

1. **Compatibility with Strategic Priorities & Activity Priority Areas-**Describe how the activity and/or program addressed the Activity Priority Area identified above and how it aligned with ACSM’s overall strategic priorities as outlined in the original application.
2. **Evaluation-**Explain how your regional chapter evaluated the success of the activity or program. Please provide specific metrics and outcome information.
3. **Budget-**
Please provide the final budget for the activity or program. The final budget should outline all expenses related to the program and should note if the regional chapter was required to use funds in addition to the grant support received from ACSM.
4. **Supporting Material (Optional)-**
Feel free to provide any additional materials which you think might show the success of the activity or program and that would make a case for the ACSM Board of Trustees continuing to support the grant program into the future.

**Summary Report for Grant #2 (For use if your chapter received more than 1 grant)**

**Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Program Overview-**Please provide a brief description of the program/activity that was supported by the grant.
2. **Activity Priority Area for which the Grant was Submitted:**

\_\_\_\_\_\_ ***Capacity & Infrastructure Building*** - Activities & programs within this category should be related to improving

 operations, sustainability and institutional strength of your Regional Chapter. Examples might include: technology

 improvements, administrative improvements, projects that lead to long-term financial stability, etc.

\_\_\_\_\_\_ ***Grass-roots Activation of ACSM National Projects & Programs-*** Activities and programs within this category should be

 related to grass-roots efforts related to ACSM National programs such as Exercise is Medicine®, Designed to Move,

American Fitness Index, ACSM Advocacy efforts, Media Leadership or other projects & programs specifically outlined in the SOAR Strategic Planning document.

\_\_\_\_\_\_ ***Innovation with High-Impact & Sustainable Potential-*** Activities and programs within this category should be those that

 showcase innovation and offer high-impact solutions in areas such as education, meetings, student engagement, member

 recruitment & retention, diversity initiatives, leadership development, etc. When appropriate, the proposed projects should

 align with similar priorities at the National level as outlined in the SOAR Strategic Planning document.

1. **Compatibility with Strategic Priorities & Activity Priority Areas-**Describe how the activity and/or program addressed the Activity Priority Area identified above and how it aligned with ACSM’s overall strategic priorities as outlined in the original application.
2. **Evaluation-**Explain how your regional chapter evaluated the success of the activity or program. Please provide specific metrics and outcome information.
3. **Budget-**
Please provide the final budget for the activity or program. The final budget should outline all expenses related to the program and should note if the regional chapter was required to use funds in addition to the grant support received from ACSM.
4. **Supporting Material (Optional)-**
Feel free to provide any additional materials which you think might show the success of the activity or program and that would make a case for the ACSM Board of Trustees continuing to support the grant program into the future.

**Summary Report for Grant #3 (For use if your chapter received more than 2 grants)**

**Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Program Overview-**Please provide a brief description of the program/activity that was supported by the grant.
2. **Activity Priority Area for which the Grant was Submitted:**

\_\_\_\_\_\_ ***Capacity & Infrastructure Building*** - Activities & programs within this category should be related to improving

 operations, sustainability and institutional strength of your Regional Chapter. Examples might include: technology

 improvements, administrative improvements, projects that lead to long-term financial stability, etc.

\_\_\_\_\_\_ ***Grass-roots Activation of ACSM National Projects & Programs-*** Activities and programs within this category should be

 related to grass-roots efforts related to ACSM National programs such as Exercise is Medicine®, Designed to Move,

American Fitness Index, ACSM Advocacy efforts, Media Leadership or other projects & programs specifically outlined in the SOAR Strategic Planning document.

\_\_\_\_\_\_ ***Innovation with High-Impact & Sustainable Potential-*** Activities and programs within this category should be those that

 showcase innovation and offer high-impact solutions in areas such as education, meetings, student engagement, member

 recruitment & retention, diversity initiatives, leadership development, etc. When appropriate, the proposed projects should

 align with similar priorities at the National level as outlined in the SOAR Strategic Planning document.

1. **Compatibility with Strategic Priorities & Activity Priority Areas-**Describe how the activity and/or program addressed the Activity Priority Area identified above and how it aligned with ACSM’s overall strategic priorities as outlined in the original application.
2. **Evaluation-**Explain how your regional chapter evaluated the success of the activity or program. Please provide specific metrics and outcome information.
3. **Budget-**
Please provide the final budget for the activity or program. The final budget should outline all expenses related to the program and should note if the regional chapter was required to use funds in addition to the grant support received from ACSM.
4. **Supporting Material (Optional)-**
Feel free to provide any additional materials which you think might show the success of the activity or program and that would make a case for the ACSM Board of Trustees continuing to support the grant program into the future.

**Compliance Signature**

By signing this report, I agree that the information contained in this report is true and accurate. I certify that the report has been reviewed and approved by my Regional Chapter’s Officers & Board of Trustees prior to submission. I understand that ACSM National has the right to verify any of this information to ensure grant funds were spent appropriately.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chapter Leadership Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_