

EQUITY & DIVERSITY FUND REPORTING FORM

CONTACT INFORMATION

| | |
|--|---|
| Contact Name: | |
| Contact Title: | |
| Student Group/Unit Name: | |
| Phone: | Email: |
| Campus location (Building/ room #): | York Campus: <input type="checkbox"/> Glendon <input type="checkbox"/> Keele |

PROJECT INFORMATION

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|--|
| Project Name: |
| CHR Project # |
| If there were there any changes to the project and information provided on you application form, please state them below. |

Tell us what you achieved by undertaking this project:

Knowing what you know now after completing the project, what would you do differently if you were to undertake this project again?

If your project involved an event, who attended?

| | | | |
|------------------------------------|---|---|---|
| <input type="checkbox"/> Students: | # | <input type="checkbox"/> Faculty: | # |
| <input type="checkbox"/> Staff: | # | <input type="checkbox"/> Wider York Community: | # |

If you created promotional materials for this project, please attach a copy.

Yes, copy attached Non applicable

| | |
|---|-------------|
| Funding Amount Approved: \$ | |
| List the item(s) purchased with the CHR's funding: | Cost |
| | |

*** Please Note ***

RECEIPTS (NOT INVOICES) MUST BE ATTACHED TO THIS REPORT

Receipts are clearly marked as a receipt by the service provider selling you the item or service.

Be sure to request a receipt from the provider if you did not receive one.

Without a receipt, funding will be withheld.

| |
|-----------------------------|
| Additional Comments: |
| |

SIGNATURE

| | |
|--------------------------|-------------|
| | |
| Contact Signature | Date |

Please submit your report via email to:

Regan Mancini, Programs, Outreach and HR Advisor,

rmancini@yorku.ca

Centre for Human Rights

York University, Keele campus

Victor Phillip Michael Dahdaleh Building (formerly TEL), Room 2070

Tel: 416-736-5682 / TTY: 416-650-8023 / Fax: 416-650-8023