

#74

COMPLETE

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Q1 Name of your organization.

1. Inland Valley Council of Churches, dba Inland Valley Hope Partners

Q2 Grant #

20150983

Q3 Grant Period

January 1 - June 30, 2016

Q4 Location of your organization

City	Pomona
State	CA

Q5 Name and Title of person completing evaluation.

Wyske G. Visser, President/CEO

Q6 Phone Number:

909-622-3806

Q7 Email address.

wyskev@inlandvalleyhopepartners.org

Page 2: Key Outcomes and Results

Q8 Total number of clients served through this grant funding:

2,500

Q9 Describe the project's key outcomes and results based on the goals and objectives. Use the following format: State the Goal: State Objective 1: Describe the Activities, Results and Outcomes for Objective 1: State Objective 2 (if applicable): Describe the Activities, Results and Outcomes for Objective 2: State Objective 3 (if applicable): Describe the Activities, Results and Outcomes for Objective 3:

Hope Partners Food Security program serves an average of 4,000 clients each month, including 50% children, 11% seniors on fixed income and about 10% families and individuals experiencing homelessness.

Q10 Please describe any challenges/obstacles the organization encountered (if any) in attaining goals & objectives.

we did not encounter any obstacles during the program period.

Q11 How did you overcome and/or address the challenges and obstacles?

n/a

Q12 Describe any unintended positive outcomes as a result of the efforts supported by this grant.

The grant allowed us to provide clients with some extra food instead of the bare minimum.

Q13 Briefly describe the impact this grant has had on the organization and community served.

The grant allowed leverage of other funding, since funders like to hear that we are supported by local foundations. It also allowed us to purchase the food, since one of the federal grant was late in funding.

Page 3: Budget

Q14 Please provide a budget expenditure report of the approved line items. Include a brief narrative on how the funds were used to fulfill grant objectives.

We used the funds to purchase food through our wholesaler

Page 4: Success Stories

S.L. Gimbel Foundation Fund

Q15 Please relate a success story:

I would like to say thank you to all the people who have donated diapers and food to Hope Partners. I am a single mother of two. I work a part time job, my daughter is in the 3rd grade and my baby is 8 months old. The diapers are a big help. Unfortunately, there have been times I have had to pick between food or diapers for my baby. No family should have to choose between diapers and food! Having the assistance of the program for both food and diapers gives me the ability to provide for my family. I know first-hand how expensive diapers are, so I am very grateful that people are willing to donate these items to help the families that struggle. Thank you all so much for all your donations! Signed by family.

Q16 Please relate a success story here:

Respondent skipped this question

Q17 Please relate a success story here:

Respondent skipped this question

Page 5: Organizational Information

Q18 Which category best describes the organization. Please choose only one.

Basic Needs Support

Q19 What is the organization's primary program area of interest?

Health & Human Services

Q20 Percentage of clients served through grant in each ethnic group category. Total must equal 100%

African American	15
Asian/Pacific Islander	2
Caucasian	23
Native American	1
Hispanic Latino	59

Q21 Approximate percentage of clients served from grant funds in each age category.

Children Birth-05 years of age	10
Children ages 06-12 years of age	15
Youth ages 13-18	24
Young Adults (18-24)	0
Adults	40
Senior Citizens	11

Q22 Approximate percentage of clients served with disabilities from grant funds.

Respondent skipped this question

Q23 Approximate percentage of clients served in each economic group.

At/Below Poverty Level	96
Homeless/Indigent	10
Working Poor	90

Q24 Approximate percentage of clients served from grant funds in each population category.

Respondent skipped this question
