# Grantee Action Plan and Evaluation Form

**Grantee**
**Organization:** FLPOA  
**Project Coordinator:** FLPOA Board  
**Phone/Email:**  
**Project Title:** FLPOA Action Plan – Shoreline Restoration

## Summary of Project
*(1 or 2 sentences)*

Continue coordination with University of Minnesota Extension, DNR, and Crow Wing Soil and Water Conservation District on shoreline restoration projects. Most of the restorations have been completed on East and West Fox Lakes.

*Note:* At least one goal should answer the question, “So What?” What difference will your project make in your community, in changed lives, in new skills, knowledge, behaviors, or attitudes? Can you measure that change?

**Goal #9**  
*(must be measurable results, not just effort)*

**Action Plan**  
What steps need to be done to achieve this goal:

<table>
<thead>
<tr>
<th>Action</th>
<th>By When</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Complete at least four shoreline restoration projects.</td>
<td>2012</td>
<td>To be determined</td>
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<tr>
<td>2. Research offering mini-grant, from the FLPOA, to property owners for restoration projects.</td>
<td>2012</td>
<td>To be determined</td>
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<tr>
<td>3.</td>
<td></td>
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<td>4.</td>
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</table>

**Expected Result:**
Complete four shoreline restoration projects on four different lakes in the City.

**Results:** *Please note: the remaining questions are to be filled out at mid-term (if grant exceeds $5,000) and at end of grant period for evaluation purposes.

**Goal #9 Mid-point Result** *(fill out at mid-point ONLY if grant exceeds $5,000)*

**Goal #9 Actual Result** *(to be completed at end of grant period for final report)*

Initiative Foundation use only