

DEMOGRAPHIC DATA - REPORT FORM
The Community Foundation for Greater New Haven
The Valley Community Foundation

Grantee Name:

Grant Number:

Please provide demographic information on the individuals your organization served during the grant term in the tables below. For project grants, please provide information specific to the project or initiative funded by The Community Foundation. For general operating and capacity building grants, please provide information on the individuals served by your organization during the grant term overall.

RACE & ETHNICITY

<i>For each race or ethnic group below indicate the <u>number and percentage</u> of clients/customers your project served during the grant term:</i>			
African American	American Indian/Native American	Asian	Caucasian
#	#	#	#
%	%	%	%
Hispanic/Latino	Multi-Racial	Other	Unknown
#	#	#	#
%	%	%	%

GENDER

<i>For each gender group below indicate the <u>number and percentage</u> of clients/customers your project served during the grant term:</i>			
Female	Male	Other	Unknown
#	#	#	#
%	%	%	%

AGE

<i>For each age group below indicate the <u>number and percentage</u> of clients/customers your project served during the grant term:</i>		
Ages 0-5	Ages 6-18	Ages 19-24
#	#	#
%	%	%
Ages 25-64	Over the Age of 64	Unknown
#	#	#
%	%	%

POPULATION INCOME

<i>For each income group below indicate the <u>number and percentage</u> of clients/customers your project served during the grant term:</i>			
Very low income	Low income	Above low income	Unknown
#	#	#	#
%	%	%	%

Note: If your organization does not collect demographic information please use the space below to explain why.