

Please use the form provided. Using another reporting form and/or template is not acceptable and will negatively impact on your chances of receiving further funding. All sections of the reporting form need to be completed in order for you to fulfil your grant requirements.

Also, please note that if your organisation completed a monitoring and evaluation indicator table as part of your grant agreement, an updated version of this table (detailing progress made towards set objectives) **must** be included along with this report.

The Rand Merchant Bank Fund is required by the BEE Codes of Good Practice No. 29617 of 2007, statement 700, section 3 (3.2) (3.2.2) and (3.2.3) to provide the ethnic and gender breakdown of all the beneficiaries of its Corporate Social Investment.

Please complete the reporting form and submit it with the attachments requested in Section 9 by the applicable deadline. Do not forget to keep a copy of your report.

Date of submission _____

Name of organisation _____

Name of funded project _____

Grant amount (Rand) _____

Project reference number _____

Reporting Period: _____ (month) _____ (year) **TO** _____ (month) _____ (year)

	YES	NO
Is this a multi-year grant?	<input type="checkbox"/>	<input type="checkbox"/>

If this is a multi-year grant, please indicate what year you are reporting on (e.g., year 1 out of 3 years):

Year _____ out of _____ Years

Please complete the application form and send it, together with the attachments, to:

By Post:

Rand Merchant Bank Fund
Private Bag X125
Braamfontein 2017

By Hand:

Rand Merchant Bank Fund
Metropolitan Office Park, Block B
8 Hillside Road
Parktown 2193

By email: firstrandfoundation@tshikululu.org.za

Should you have any queries, please contact 011 544 0300. The FirstRand Foundation and the Rand Merchant Bank Fund is administered by Tshikululu Social Investments.

Section 1 – Organisation Details

Name of organisation	
Date of establishment	
Physical address	
Province	
Postal address (including postcode)	
Office Telephone number	
Full name of person submitting application	
Position of person submitting application	
Direct telephone number of person submitting application	
Alternative telephone number	
Fax number	
E-mail address	
Full name of alternative contact person	
Alternative email address	
Organisation website	

Section 2 – Your organisation’s people

1. In the table below, please indicate if there have been any changes (i.e., resignations or appointments) to your board during the reporting period.

Full Name	Role	Race	Gender	Disability	Resigned OR Appointed
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	

2. In the table below, please indicate if there have been any changes (i.e., resignations or hirings) to your management during the reporting period.

Full Name	Job Title	Race	Gender	Disability	Resigned OR Hired
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	

Section 3 – Narrative report on your grant

1. Please fill in the table below on the project for which the organisation received funding as per your original application and signed grant letter.

ITEM	COMMENTS
Name of project	
Primary objective(s) of the project	
If you made any changes to the original project plan, please describe them	
What challenges did the project face during the reporting period?	
What were the highlights of the project during the reporting period?	

Planned project start date	
Actual project start date	
If the start of the project was delayed, please explain the reasons	
What was the funding used for?	

PROGRAMME IMPACT: BENEFICIARIES REACHED IN THE REPORTING PERIOD									
Beneficiaries	Total	Female	Male	African	Coloured	Indian	White	Other	Disabled
Direct									
Indirect									

Please complete where applicable. If these indicators do not apply to your program, write *n/a* ("not applicable"). **Numbers should only refer to activities completed with Rand Merchant Bank Fund monies.**

Notes to the table above:

"Other" refer to foreign nationals or those not included in the ethnic breakdown provided in the table.

"Direct beneficiary" refers to a person, group of persons or organisation that has direct contact with the intervention or project. "Indirect beneficiary" refers to a person, group of persons or organisation that has no direct contact with an interventions programme or project but which is affected by it via a direct beneficiary.

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2. Please provide a case study and/or success story from the reporting period describing how an individual, organisation or community has changed as a result of your work.

Section 4 – Information about your organisation

1. Have there been any changes to your organisation in the reporting period (e.g. new funders or fewer funders, new strategy/business plan, projects closing or new ones opening, provincial spread changing, etc.)?
2. What have been your organisation's key achievements during the reporting period?
3. **Excluding fundraising**, what have been your organisation's key challenges during the reporting period?

Section 5 – Attachments

Please attach the following documents with your report:

Document	Attached? (check)	Reason if not attached
Latest annual report	<input type="checkbox"/>	
Latest set of unabridged, signed audited financial statements	<input type="checkbox"/>	
If your organisation has an associated Trust or any other body that contributes to the finances of the organisation, please submit the audited financial statements of this body	<input type="checkbox"/>	
Financial report for the grant, including original planned budget and actual expenditure	<input type="checkbox"/>	
An updated version of your agreed monitoring and evaluation indicator table detailing progress made towards set objectives (if applicable)	<input type="checkbox"/>	
Photographs of your work (NB: the Fund assumes that we have permission to use any photographs submitted for the purpose of our own reporting and publicity unless the photograph is clearly marked to the contrary.)	<input type="checkbox"/>	
Any new internal or external evaluations of the impact of the work of your organisation	<input type="checkbox"/>	