



UAF A&P GRANTEE FINAL REPORT
Security and Well-Being Grant

Name of person completing the report:	
Organisation:	
Grant Amount:	
Date Submitted:	
Grant Number:	

REFLECTION ON GRANT ACTIVITIES

How many individuals/groups/organisations did the grant support?

Number of Individuals

Number of Groups/Communities

Number of Organisations

Has this grant helped you to feel safer [for this moment]?

☐ Yes

☐ No

☐ Partially safer - If so, how?



UAF A&P GRANTEE FINAL REPORT
Security and Well-Being Grant

Are you able to continue your activism?

- ☐ Yes
☐ No
☐ Pausing activism for safety & security reasons

Where are you currently in your activist journey?

Are you better prepared for similar risks or threats in the future?

- ☐ Yes
☐ No
☐ Partially

How are you preparing to face future risks and threats?

Do you have other networks of support? ☐ Yes ☐ No