# **PROJECT FINAL REPORT**

**CONSERVATION PROJECT** 

Please ensure you use Adobe Reader when completing this form:



Please complete this Final Report for a specific conservation project. Alternatively, use the Annual Final Report for an integrated resource stewardship office or guardian watchman program.

Complete and submit this document by email to Coast Opportunity Funds at projects@coastfunds.ca. If you have any questions regarding the Final Report, we can be reached at 604-684-0223.

regarding the Final Report, we can be reached at 604 6223.								
Conservation Project Title	Date of this Final Report (dd mmm yyyy)							
Applicant Organization (Legal Name)	Coast Funds Project Number							
Project Start Date (dd mmm yyyy)	Project End Date (dd mmm yyyy)	Final Award Amount						
Final Progress Report								
Please provide an overview of the project in	cluding a summary of the most important ach	nievements.						

## COAST OPPORTUNITY FUNDS

Key Objectives			
Please describe how each of the project obje	ectives were achieved, a	and note any achievements that were not originally anticipated	
Original Objective	Achievement (%)	Details	
1.			
2.			
3.			
4.			
5.			
Economic Benefits			
Please provide a summary of the economic	benefits to the local and	d/or regional economy that the project achieved or enabled.	
Environmental and Social Benefits			
Please provide a summary of the environme	ental and social benefits	that have resulted from the project.	
Lessons Learned and Next Steps			
Were there lessons learned as the project w	as implemented? What	t would you do differently if you were to do the project again?	

#### New Employment (Job Creation)

Please provide an overview of the  $\underline{new}$  employment this project created. Please only include jobs that did not exist previous to this project work occurring.

Job types	Total number of new jobs	Of total new jobs, # held by First Nations		rs of employment per ek (average)		al months worked year
Direct permanent full-time jobs:			35+	hours/week	12	months/year
Direct permanent part-time jobs:				hours/week	12	months/year
Direct seasonal jobs:				hours/week		months/year
Direct temporary jobs (e.g. contract or consulting):				hours/week		months

Please describe the above jobs including job titles/roles and any further details:

#### Permanent New Full-Time Equivalent (FTE) Employment Created:

#### Science, Research, and Conservation Partnerships

7.

8.

Please confirm your organization's key project partners including universities, non-governmental organizations, and other First Nations.

7 70	ase confirm your organization's key project partners	merading aniversities, non gove	erimental organizations, and other riest vations.
	Partner Organization	Туре	Outcomes
1.			
2.			
3.			
4.			
5.			
6.			

Please describe how these partnerships increased the success of your conservation project

Conser	vancies, Parks, and	Protected Area	S		
Please	list the conservanc	ies, parks, and p	rotected areas included in pr	oject work and note the type of work performed in each area.	
Сс	onservancy Name		Type of Work	Description	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
Did this	s project involve th	e development c	or revisions of protected area	management plan(s)?	
	Yes	No	If yes, how many pla	ns completed during the project:	
Please	describe progress (	on protected are		any important aspects of the plan(s) implemented during the pr	oiect.
	onal Knowledge				
	check each of the f t the areas selected		of traditional knowledge that	the project supported and explain how your project work helpe	d to
	Language				
	Access to traditi	onal foods			
	Engaging elders youth	to transfer knov	vledge to		
	Traditional stew	ardship practice	S		
	Protection and r (e.g. CMTs, histo				
	Expression of ar	t or history			

#### **Ecosystem-based Management Conservation Capacity Building**

How many individuals received training as a part of this project?

How many days of training did staff receive overall? (Please indicate the total for all staff combined)

In which general areas did individuals receive training?

Financial Management Office/Administration Science/Research

General Stewardship Vessel Operator GIS

Guardian Watchman First Aid and Safety Leadership and Management

Data Management Cultural Other:

Please describe how the training was successful and helped to reach the conservation goals of this project.

If training was at a formal institution, please indicate the program name, institution, certification if achieved, and number of people.

Program	Institution	Certification
1.		
2.		
3.		
4.		
5.		
6.		
7.		

## **New Organizations Created**

Did your project help to create any new organizations? Please describe below.

Other Program Funding	unding that contributed to t	the project		
Funding Source		Type	Current Status	Amount
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
		To	otal Other Funding Sources:	\$
		Funding Received from	m Coast Opportunity Funds:	\$
			Total Project Funding:	\$
Habitat and Ecosystem Re	estoration Projects			
Did your project include a	ny habitat or ecosystem res	storation or enhancement	work? (e.g. silviculture, street	am restoration)
Yes	No	If yes, approximate area	a of project site(s) (in hectare	es):
		If yes, did the restoration	on work include riparian area	is?
If yes above, please descri	be the habitat or ecosysten	n restoration or enhancen	nent work under this project	and any results.
Please note the species th	at specifically benefited fro	m the habitat or ecologica	al restoration work performe	d during this project.
1.		4.		
2.		5.		
3		6		

#### Conservation and Scientific Research Projects

Did this project include scientific research? (e.g. collection of sample data for water chemistry, isotope, genetic analysis, etc.)

Yes

No

Please describe the research and summarize any findings. If research reports were produced, please attach them to this report.

Please describe how these findings will inform the next steps of conservation and scientific research for the Nation.

Please note the species that were the focus of research under this project.

1.

4

2.

5.

3.

6.

### **Attachments**

Please ensure that each set of documents noted below is attached as part of your complete Final Report.

#### **Project Photos**

Please attach photos showing the completed project. Where possible, please include photos of research, habitat restoration work or other conservation projects; photos of the people who led the project; and/or photos of community members involved with the project.

#### **Supporting Financials**

Please attach any supporting financials including organization balance sheets, income statements, or general ledger print outs that help to support the project work plan on page 8 & 9.

#### **Other Documents**

Please attach other relevant documents developed during the program including research reports, protected area management plans, strategic plans, or other scientific reports that resulted from your work.

List other documents attached:

Primary Contact Information			
Name	Title		
Email	Work Phone	Work Extension	Cell Phone
Mailing Address	City	Province	Postal Code

# **Authorization**

By entering my name here electronically, I (we) certify that the information in this report and attached financial documents is accurate, complete, and fairly presented.

Name of an Organizational Signing Authority	Title		Date (dd mmm yyyy)

# PROJECT WORK PLAN

# Please provide an update for each completed Work Plan Activity.

Work Plan Activity	Responsibility	Budget	Budget Category	Planned Start Date	Planned End Date	Actual Cost	Actual End Date	Activity Update
List all key activities in the work plan for the project.	Identify the person, partner or supplier responsible for each activity.	Note the planned cost for each activity.	Select the expense type for each activity.	Note the planned activity start date. (dd-mmm-yyyy)	Note the planned activity end date. (dd-mmm-yyyy)	Note the actual cost for each completed activity.	Note the date that each activity was completed. (dd-mmm-yyyy)	Please provide an update for any activities that are behind schedule or incomplete. If there is a significant variance in cost vs. budget, please provide an explanatory note.
1.		\$				\$		
2.		\$				\$		
3.		\$				\$		
4.		\$				\$		
5.		\$				\$		
6.	5	\$				\$		
7.		\$				\$		
8.		\$				\$		
9.		\$		- 1		\$		

Work Plan Activity	Responsibility	Budget	Budget Category	Planned Start Date	Planned End Date	Actual Cost	Actual End Date	Activity Update
10.		\$				\$		
11.		\$				\$		
12.		\$				\$		
13.		\$	10			\$		
14.		\$				\$		
15.		\$				\$		
16.		\$				\$		
17.	5	\$				\$		
18.		\$				\$		
19.		\$		y.A.		\$		
20.		\$				\$		
ТОТА	L PROJECT BUDGET:	\$		TOTAL	COSTS TO DATE:	\$		