**臺中市社區發展培力補助計畫**

**附件9**

**(小旗艦型計畫核定後每月填報)**

**【執行成果月報表】**

(請逐級核章)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **計畫名稱：** | | | | | | | | | | **日期： 年 月** | | | | | |
| **一、方案執行統計** | | | | | | | | | | | | | | | |
| **方案名稱** | **服務人次** | | | | | | **志工服務** | | | | | | | | **備註** |
| **人數** | | | | **人次** | | **人數** | | **人次** | | | | **志工總服務時數** | |
| 男 | | 女 | | 男 | 女 | 男 | 女 | 男 | | | 女 |
| (範例) |  | |  | |  |  |  |  |  | | |  |  | |  |
| 弱勢婦女培力服務 |  | |  | |  |  |  |  |  | | |  |  | |  |
| 弱勢兒童課業輔導 |  | |  | |  |  |  |  |  | | |  |  | |  |
|  |  | |  | |  |  |  |  |  | | |  |  | |  |
| 總計 |  | |  | |  |  |  |  |  | | |  |  | |  |
| **二、相關會議與資源運用統計** | | | | | | | | | | | | | | | |
| **項目** | | **日期/合作單位** | | | | | | | | | | | | **次數** | |
| 工作會議 | |  | | | | | | | | | | | |  | |
| 專家學者輔導 | |  | | | | | | | | | | | |  | |
| 資源運用 | |  | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | | |
| 填表人： | | | | 總幹事： | | | | | | | 理事長： | | | | |