



**Asia and Pacific Alliance of YMCAs
Youth Program and Training Fund
Report**

Program title:	
Date and Time:	
Venue :	
Total number of participants:	
Number of Youth (aged 12 – 30) involved:	
Program objectives:	
Program summary / conclusion:	
How to sustain the program:	

What are the impact /outcome to youth group, YMCA and the communities?	
Actual Expense <i>[Please include breakdown in US dollars.]</i>	

Report prepared by	
Country:	
Local YMCA:	
Name of Program Coordinator:	
Name of Youth Leader:	
YMCA youth group: (if any)	
Date: (DD/MM/YYYY)	

* Please return this application form to APAY office.

Email to office@asiapacificymca.org and roger@asiapacificymca.org ;

Fax to +852 (2385 4692)