STOCKTON UNIVERSITY ANNUAL REPORT FOR 2020 INITIATIVES PROJECT

PROJECT LEADER(S):					
PROJECT TITLE:					
DATE:					
CC:					
The boxes below expand as needed to accommodate your notes. You may also include/submit appendices or attachments, if needed. Email a copy of this completed form to Jessica Kay, Planning Analyst at:					
Please provide a summary of the project and your experience.					
Please attach a copy of yo	our original proposal or list your stated objectives and expected outcomes.				

Please describe the results of your project and compare them to your original expectations. Elaborate on how well your objectives were met and how they might have changed. Note any particular obstacles that may have prevented your achieving full satisfaction on desired outcomes.

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