

Ohio SNAP-Ed Program Log – 2016

DIRECT EDUCATION: Complete Parts 1, 2, and 4 of this form. **INDIRECT EDUCATION:** Complete Parts 1, 3, and 4.

PART 1: GENERAL PROGRAM INFORMATION

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| <p>(1) Number of volunteers _____</p> <p>(2) Scheduled program start time _____</p> <p>(3) Scheduled program end time _____</p> | <p>(4) Date of program _____</p> <p>(5) County/unit _____</p> <p>(6) Teacher's initials _____</p> | <p>(7) Data Source for Determining SNAP Eligibility (✓ one)</p> <p><input type="checkbox"/> 1. SNAP/TANF participation</p> <p><input type="checkbox"/> 2. Agency income verification (WIC, Pub Housing, etc)</p> <p><input type="checkbox"/> 3. Census-tracked data/geographic location</p> <p><input type="checkbox"/> 4. Schools – Free/reduced lunch eligibility data</p> |
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| <p>(8) Audience Information (✓ one)</p> <p><input type="checkbox"/> 1. Persons currently participating in/applying for SNAP and/or residing in a SNAP household</p> <p><input type="checkbox"/> 2. Income-based: persons eligible for other federal assistance programs (SSI, WIC, TANF) & persons with gross incomes ≤130% poverty guidelines</p> <p><input type="checkbox"/> 3. Location-based: persons at SNAP/TANF job program sites, public housing, food banks or pantries, soup kitchens, etc.</p> <p><input type="checkbox"/> 4. Persons at venues where it can be documented that the venue serves generally low-income persons where ≥ 50% of persons have gross incomes ≤ 185% poverty guidelines</p> | <p>(9) Target Audience (✓ one)</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><input type="checkbox"/> 1. Families with children</p> <p><input type="checkbox"/> 2. Families without children</p> <p><input type="checkbox"/> 3. Elderly</p> <p><input type="checkbox"/> 4. Teens (Grades 9-12)</p> <p><input type="checkbox"/> 5. Youth (Grades K-8)</p> </td> <td style="width: 50%; vertical-align: top;"> <p><input type="checkbox"/> 6. Youth (Pre-K)</p> <p><input type="checkbox"/> 7. Adults & Youth combined</p> <p><input type="checkbox"/> 8. Cooking Matters – Parents</p> <p><input type="checkbox"/> 9. Cooking Matters – Adults</p> <p><input type="checkbox"/> 10. Cooking Matters – Teens</p> </td> </tr> </table> <p>(10) Type of Program (✓ one)</p> <p><input type="checkbox"/> 1. Direct Education</p> <p><input type="checkbox"/> 2. Indirect Education</p> <p><input type="checkbox"/> 3. Cooking Matters</p> | <p><input type="checkbox"/> 1. Families with children</p> <p><input type="checkbox"/> 2. Families without children</p> <p><input type="checkbox"/> 3. Elderly</p> <p><input type="checkbox"/> 4. Teens (Grades 9-12)</p> <p><input type="checkbox"/> 5. Youth (Grades K-8)</p> | <p><input type="checkbox"/> 6. Youth (Pre-K)</p> <p><input type="checkbox"/> 7. Adults & Youth combined</p> <p><input type="checkbox"/> 8. Cooking Matters – Parents</p> <p><input type="checkbox"/> 9. Cooking Matters – Adults</p> <p><input type="checkbox"/> 10. Cooking Matters – Teens</p> |
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PART 2: DIRECT EDUCATION PROGRAMS

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| <p>(11) Direct Education Format (✓ one)</p> <p><input type="checkbox"/> 1. Single lesson</p> <p><input type="checkbox"/> 2. Series</p> <p style="padding-left: 20px;"><i>For series, complete 11a & 11b.</i></p> <p>(11a) Session # _____</p> <p>(11b) Total # of sessions _____</p> <p>(12) # of Direct Contacts _____</p> <p>(13) Actual Length of Program (minutes)</p> <p style="padding-left: 20px;"># of Minutes _____</p> <p>(14) Audience Description</p> <p style="padding-left: 20px;"><i>Enter a brief description of your program's audience below. Example: Jones Elementary 3rd grade – Mrs. Cook</i></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(15) Name of PARTNER AGENCY (sponsor)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(16) Name of DELIVERY SITE (location)</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>(17) Delivery Site Category (✓ the category of the <u>delivery site</u> from #16)</p> <p><input type="checkbox"/> 1. Adult Ed, Job Trg, TANF, & Vet Svcs sites</p> <p><input type="checkbox"/> 2. Adult Rehabilitation Centers</p> <p><input type="checkbox"/> 3. Child Care Centers (NOT Head Start)</p> <p><input type="checkbox"/> 4. Community Centers</p> <p><input type="checkbox"/> 5. Congregate Meal Sites/Sr. Nutrition Svcs</p> <p><input type="checkbox"/> 6. Emergency Shelters</p> <p><input type="checkbox"/> 7. Extension Offices</p> <p><input type="checkbox"/> 8. Faith-Based Centers/Places of Worship</p> <p><input type="checkbox"/> 9. Farmers Markets</p> <p><input type="checkbox"/> 10. Food Banks/Food Pantries</p> <p><input type="checkbox"/> 11. Food Stores</p> <p><input type="checkbox"/> 12. Community/School Gardens</p> <p><input type="checkbox"/> 13. Head Start Facilities</p> <p><input type="checkbox"/> 14. Health Care Clinics & Hospitals</p> <p><input type="checkbox"/> 15. Individual Homes (personal residences)</p> <p><input type="checkbox"/> 16. Libraries</p> <p><input type="checkbox"/> 17. Mobile Education Sites</p> <p><input type="checkbox"/> 18. Public Housing Sites</p> <p><input type="checkbox"/> 19. Parks & Recreation Centers</p> <p><input type="checkbox"/> 20. Schools – K-12 (includes afterschool)</p> <p><input type="checkbox"/> 21. Schools – Colleges/Universities</p> <p><input type="checkbox"/> 22. SNAP Offices</p> <p><input type="checkbox"/> 23. WIC Clinics</p> <p><input type="checkbox"/> 24. Worksites</p> <p><input type="checkbox"/> 25. Other Site Type _____</p> <p>(18) Cooking Matters Topics (✓ one lesson #)</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><input type="checkbox"/> 1. Lesson 1</p> <p><input type="checkbox"/> 2. Lesson 2</p> <p><input type="checkbox"/> 3. Lesson 3</p> </td> <td style="width: 50%; vertical-align: top;"> <p><input type="checkbox"/> 4. Lesson 4</p> <p><input type="checkbox"/> 5. Lesson 5</p> <p><input type="checkbox"/> 6. 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Youth – Eat different vegetables</p> <p><input type="checkbox"/> 11. Youth – Drink water</p> <p><input type="checkbox"/> 12. Youth – Eat foods from MyPlate</p> <p><input type="checkbox"/> 13. Youth – Be physically active</p> <p>(20) SNAP-Ed Direct Education Topics</p> <p>Task 2 Program Topic (✓ one topic)</p> <p style="padding-left: 20px;"><i>(Choose "does not apply" if no Task 2)</i></p> <p><input type="checkbox"/> 1. Adult/Teen – MyPlate</p> <p><input type="checkbox"/> 2. Adult/Teen – Vegetables & Fruits</p> <p><input type="checkbox"/> 3. Adult/Teen - Dairy</p> <p><input type="checkbox"/> 4. Adult/Teen – Whole Grains</p> <p><input type="checkbox"/> 5. Adult/Teen – Protein Foods</p> <p><input type="checkbox"/> 6. Adult/Teen – Food Shopping</p> <p><input type="checkbox"/> 7. Youth – Eat breakfast</p> <p><input type="checkbox"/> 8. Youth – Eat different fruits</p> <p><input type="checkbox"/> 9. Youth – Eat healthy snacks</p> <p><input type="checkbox"/> 10. 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| <p><input type="checkbox"/> 1. Lesson 1</p> <p><input type="checkbox"/> 2. Lesson 2</p> <p><input type="checkbox"/> 3. Lesson 3</p> | <p><input type="checkbox"/> 4. Lesson 4</p> <p><input type="checkbox"/> 5. Lesson 5</p> <p><input type="checkbox"/> 6. Lesson 6</p> | | | |

PART 3: INDIRECT EDUCATION PROGRAMS

(21) Types of Materials Distributed (Check all the types of materials that were distributed for an indirect education)

- Fact sheets/pamphlets/newsletters
- Posters
- Calendars
- Promotional Materials with nutrition messages (pens/pencils/wallet reference cards/magnets/cups)
- Website
- Electronic (Email) materials/info distribution
- Videos/CD Rom
- Other

(22) Estimated Size of Audiences Reached through Communication & Events (Write down the estimated number of indirect contacts/ participants reached through your indirect education program. Use only **ONE** of the spaces below. Refer to the Program Evaluation Instruction Manual for specific information.)

- _____ Nutrition Education Radio PSAs
- _____ Nutrition Education TV PSAs
- _____ Nutrition Education Articles
- _____ Billboard, Bus or Van Wraps, or other signage
- _____ Community Events/Fairs – in which participated
- _____ Community Events/Fairs – only sponsored
- _____ Other

(23) Data Source for Audience Size Estimates (✓one)

- 1. Visual counts or estimates
- 2. Commercial market data on audience size (For Radio or TV PSA's or articles in a newspaper)
- 3. Other (describe below) _____

PART 4: RECORD-KEEPING INFORMATION

Complete the following information for record keeping only; this information will not be entered into the Monthly Statistical Report Excel sheet.

AGENCY CONTACT PERSON _____

PROGRAM CURRICULUM _____

LOCATION OF WHERE PROGRAM SIGN-IN SHEETS ARE KEPT (✓one) OSU Extension Office Program Site

PROGRAMMING NOTES

