



EFNEP PROGRAM LOG

Program Assistant Name: _____

Group name: _____

Delivery Site: _____

Delivery Site address: _____

Contact Information at the site:

Name: _____

Phone: _____

E mail: _____

Program starting date: _____

No. of Participants: _____

Program finish date: _____

No. of Graduates: _____

Number of Lessons:

- 6 weekly one-hour lessons
- 8 weekly one-hour lessons
- 2 lessons a week for 4 weeks
- 6 weekly lessons, 1 ½ each
- Other _____

Group Background Information (impact stories):

Some adaptations needed for this group based on kitchen facilities, concerns about flour in lesson 5 or other:

Delivery Site Type:

- Adult Education & Training Site (*adult education facilities, job training programs, college campuses, literacy centers/programs, refugee service centers*)
- Adult Rehabilitation Center
- Church
- Community Center
- Emergency Food Assistance Site (*food banks, Salvation Army, food cooperatives*)
- Extension Office
- Farmers Market
- Food Store (*food-related stores and retail food outlets*)
- Head Start Program Site
- Library
- Other Youth Education Site(*day cares, pre-schools, YMCA/YWCA, boys/girls clubs, parks and recreation*)
- Public Housing
- School
- Shelter
- SNAP Office
- WIC Program Site
- Worksite
- Home
- Other (describe) _____

Collaborating agency name:

Type of Collaboration:

- Network
- Cooperator
- Coordinator
- Coalition
- Collaborator