

NEAFCS IMPACT

Share Your Story Template



Use this template to prepare information for submission in NEAFCS IMPACT Statement Data Report Form. For more information on powerful impact statements, see the Impact Statement Reporting Course at eXtension: <https://extension.org/impact-statement-reporting/>

Affiliate President or Vice President of Public Affairs: Each state is encouraged to submit one to three programs in at least one Program/Subject Area on the NEAFCS webpage. Look under the Public Affairs tab for the *Affiliate Impact Statement Data Report Form* link to enter this information for your state affiliate. Members can submit this form to their Public Affairs state leadership for local or area programs to be considered for inclusion in the NEAFCS IMPACT statements.

Submitter name _____ Contact information (email) _____

Program/Subject Area (check one)

- Childhood Obesity Prevention
- Community Health & Wellness
- Diabetes Prevention and Management
- Disaster Preparedness
- FCS & STEM
- Financial Management
- Food & Nutrition
- Food Safety
- Healthy Homes and the Environment
- Family Stability & Vitality

Name of program _____

Total number of times program was offered? _____

If it is a series of lessons, how many lessons are there in the series? _____

Total participation reached _____

Total number of community partners, if any, participating in the program _____

Total participation reached virtually. Please include the number of people this outreach has impacted using social media and or a virtual application that was NOT recorded in total participation reached above. _____

Describe the *need, scope* and *outcomes (including highlights of your evaluation data)* of this program (do not repeat information already provided above). **Limit: 40 words.** Submissions over 40 words may be disqualified. _____

Participant or community partner *quote on program benefit*. **Limit: 40 words.** Choose or edit quotes that will be 40 words or less. _____

PHOTO (optional, but very powerful): Attach or upload a high resolution, action photo formatted as you wish it to appear. Do you have written permission on file from the subject(s) to share this photo? ____
yes ____ no (if no, do not submit to NEAFCS)

Infographic Survey Information:

1. Number of people who received Extension FCS information related to home food preservation _____
2. Number of people who received Extension FCS information on financial management _____
3. Number of people who participated in the National Dining with Diabetes programs _____
4. Number of people who received information on coping with disasters (preparedness or following a disaster) _____
5. Number of people who participated in wellness programs offered through Extension FCS _____
6. Number of people who participated in parenting or child development programs offered through Extension FCS _____
7. Number of children reached with nutrition and physical activity programs to address childhood obesity/prevention _____
8. Number of people reached with nutrition and food preparation information to improve their quality of life _____
9. Number of people seeking information related to in-home safety _____
10. Number of people who participated in programs where a science, technology, engineering, or math component was taught or used _____