



Northern Ontario Aboriginal Diabetes Initiative

2011-12 Diabetes Prevention & Management Community-Based Workplan & Evaluation Form

Target community(ies): _____

Submitted by (community or organization): _____

Submitted by (name of person): _____

Contact number: _____ Contact e-mail: _____

Workplan partners: _____

Complete now (to be used if funding is approved):

TOTAL amount requested: _____ TOTAL amount approved: _____ (office use)

Name of Chief or Executive Director: _____

Address of Chief or Executive Director: _____

E-mail of Chief or Executive Director: _____

Cheque made out to (community or organization name): _____

Name of person to send cheque to: _____

Address for mailing cheque: _____

Note: Initial deadline March 18, 2011. Email to AboriginalDiabetes@ndhn.com or fax to 807-623-5454. Evaluation (Actual Outcomes and Additional Comments) **MUST** be submitted once funded initiative has been completed (by March 31, 2012). *Other Aboriginal communities or organizations can benefit from your experience with your NDHN Northern Ontario Aboriginal Diabetes Initiative project. Descriptions of NOADI funded projects can be found on the NDHN website at www.ndhn.com under the Aboriginal Initiatives link, To share photos, please email to AboriginalDiabetes@ndhn.com and fax signed consent form(s) to 807-623-5454.*

Project Title: _____

Goal <i>(Prevention or Management or both)</i>	Target Group <i>(Who is the activity for e.g. students in JK-5), adults etc.</i>	Activity <i>(What do you plan to do? Use a separate line for each activity)</i>	Funding Requirement <i>(Money needed i.e. for materials, space, advertising, etc.)</i>	Expected Completion Date	Expected Outcome(s) <i>(How many people will come; what will change for them because of the activity in terms of diabetes health, lifestyle habits, knowledge, attitudes and so on)</i>	Actual Outcomes <i>(What actually happened compared to what you expected? Use the comments form on the back to give more details)</i>

Comments about outcomes (Complete and send in with “Actual Outcomes” when your initiative has been completed and email to AboriginalDiabetes@ndhn.com or fax to 807-623-5454):

Please add more information about what has changed for the participants, community or organization as a result of this initiative?

What do you think worked well?

What would you do differently to make your project better if you were to do it again?

Do you have any tips for a community or organization who would like to try your initiative?

Any other comments?

If someone would like to find out more information, who is the best person to contact and how should they be reached (phone number or email)?
