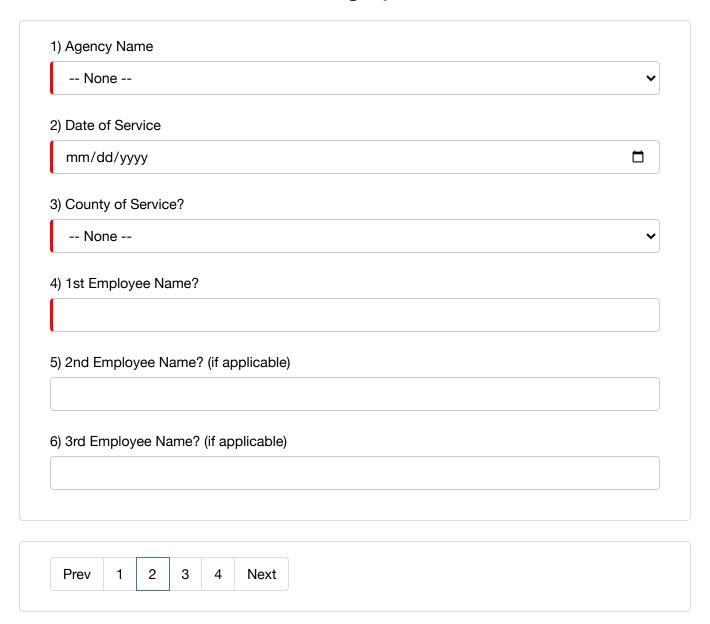
Outreach Events Form

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Please e	enter your u	nique Access	s Code below	' .		

^{* -}required

Outreach Events Form: Demographic Info



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Outreach Events Form: Event Info

7) Was the event hosted by your agency?
* Yes
○ No
○ Unsure
8) Was your outreach done as part of a larger event (i.e. farmer's market, ethnic/cultural fair or celebration)?
* O Yes
○ No
9) If you answered yes to question 8, how would you describe the primary theme of the larger event?
* Food Insecurity
Ethnic/cultural celebration
○ Spiritual
○ Fitness
Mental Health Fair (Health Fairs)
Community Resources
○ Other
○ N/A
10) Where was this event held? (Select one)
* O Your agency
Other private facility
O Public facility (i.e. library)
○ Park
○ School or college
Religious building (i.e. church, mosque, synagogue, etc)
○ Online/virtual
○ Food bank
○ Farmer's Market
Direct Individual Outreach
○ Social Media
Substance Use Recovery Program

11) Enter an address to add to a map, include the ZIP code. (If virtual, enter NA)
· ·) Efficient and address to address and applications the zir code. (If virtual, efficiency)
1.0) What we are letter as we the profession of the contract of t
12) What population was the primary focus of the outreach? (Select one)
0	General population
0	Specific racial/ethnic group
0	LGBTQ+
0	Children and Youth
0	Young Adults
0	Parents and Caregivers
0	Seniors
0	People in Recovery
0	Veterans
0	Formerly Incarcerated
0	CBO Collaboration
0	Business Collaboration
0	Other
13) Was there a secondary population focus? If so, select one below.
0	General population
0	Specific racial/ethnic group
0	LGBTQ+
0	Children and Youth
0	Young Adults
0	Parents and Caregivers
0	Seniors
0	Recovery
0	Veterans
0	Formerly Incarcerated
0	CBO Collaboration
0	Business Collaboration
0	Other
14) What was the primary subject of the material you presented/handed out? (Select one)
0	CalHOPE/Availability of Free Counseling Services

Parenting/Caregiving Issues	
○ Domestic abuse	
Mutual support/ building social network(s)	
Participating in community action	
○ LGBTQ+ Issues and Concerns	
○ Immigrant/Refugees Concerns	
Concerns of specific racial/ethnic group	
○ Recovery Focused	
Mental Health Awareness	
○ Other	
15) Was there a secondary subject of your material? If so, please select one below.	
Availability of Free Counseling Services	
○ Community Resources and Support services	
O Parenting/Caregiving Issues	
○ Domestic abuse	
Mutual support/ building social network(s)	
O Participating in community action	
○ LGBTQ+ Issues and Concerns	
○ Immigrant/Refugees Concerns	
Concerns of specific racial/ethnic group	
○ Recovery Focused	
○ Other	
16) Approximately how many people attended the larger event? (Select one)	
* O-15	
○ 16-30	
○ 31-50	
○ Over 50	
○ NA, Material/Resources left	
17) Approximately how many people did you "touch" with your information? (i.e. if you did a presentation, how many were in attendance?; number of flyers handed out?)	
* O-10	
○ 11-20	
○ 21-30	
○ Over 30	
○ NA, Material/Resources left	

18) Did you provide counseling/support and/or assistance to locate resources and other support services at the outreach event?
* Yes
○ No
○ Unsure
Prev 1 2 3 4 Next

* -required

Outreach Events Form: Success Stories, Flyers and Photos

B U B Times ▼ A ▼ □<	⊞ ▼
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ou may upload up to five (5) images or attachments below. (5 Mb	Maximum File Size)
Choose File No file chosen	Attachment #1 (Optional)
Choose File No file chosen	(Optional)
Choose File No file chosen Choose File No file chosen	(Optional) Attachment #2
	(Optional)
	(Optional) Attachment #2 (Optional) Attachment #3
Choose File No file chosen	(Optional) Attachment #2 (Optional)
Choose File No file chosen	(Optional) Attachment #2 (Optional) Attachment #3 (Optional) Attachment #4
Choose File No file chosen Choose File No file chosen	(Optional) Attachment #2 (Optional) Attachment #3 (Optional)
Choose File No file chosen Choose File No file chosen Choose File No file chosen	(Optional) Attachment #2 (Optional) Attachment #3 (Optional) Attachment #4
Choose File No file chosen Choose File No file chosen	(Optional) Attachment #2 (Optional) Attachment #3 (Optional) Attachment #4 (Optional)

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