

Project Name: _____
Overarching Need: _____
Overarching Goal: _____

Inputs	Activities	Outputs/Products	Short - to Mid-Term Outcomes	Long-term Outcomes/Impacts
Resources needed to operate your program	Planned activities to help you achieve your objectives/goals?	If you accomplish your planned activities what services/products will you provide?	How will your target population benefit if you administer the outputs/products?	Improvements in larger condition
OBJECTIVE 1: [write objective here]				
[list inputs here]	[list activities here]	[list outputs here]	[list desired outcomes here]	[list desired impacts here]
Corresponding Evaluation Questions & Data sources				
e.g.: Q: Are materials purchased and in place? Data Source: receipts Q: Were staff hired? Data Source: HR paperwork, time cards	e.g.: Q: Were trainings conducted with fidelity/as intended? Data Source: Fidelity logs	e.g.: Q: How many personnel were fully trained? Data Source: End of training questionnaire/test.	e.g.: Q: Did classroom practices change? Data Source: Classroom observations	e.g.: Q: Is there an increase in summative assessment scores? Data Source: CAASPP Scores
OBJECTIVE 2: [write objective here]				
[list inputs here]	[list activities here]	[list outputs here]	[list desired outcomes here]	[list desired impacts here]
Corresponding Evaluation Questions & Data sources				