



# A-G.U.I.D.E. Nonprofit Partner Funding Evaluation Plan

Organization: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Project/Program A: \_\_\_\_\_ Funding Period: \_\_\_\_\_

Project/Program B: \_\_\_\_\_ Funding Period: \_\_\_\_\_

|   |  |
|---|--|
| <b>PROGRAM/PROJECT</b><br><input type="checkbox"/> A <input type="checkbox"/> B | <b>Activity # _____:</b>                               |
| <b>OUTPUTS / Measurable Indicators →</b>  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |
|   |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                       | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |
|   |  |
| <b>PROGRAM/PROJECT</b><br><input type="checkbox"/> A <input type="checkbox"/> B | <b>Activity # _____:</b>                               |
| <b>OUTPUTS / Measurable Indicators →</b>  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |
|   |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                       | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |
|   |  |

|  |  |  |  |
|--|--|--|--|
| PROGRAM/PROJECT<br><input type="checkbox"/> A <input type="checkbox"/> B |  | Activity # _____:                                      |  |
| <b>OUTPUTS / Measurable Indicators →</b>                                 |  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |  |
|  |  |  |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                |  | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |  |
|  |  |  |  |
| PROGRAM/PROJECT<br><input type="checkbox"/> A <input type="checkbox"/> B |  | Activity # _____:                                      |  |
| <b>OUTPUTS / Measurable Indicators →</b>                                 |  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |  |
|  |  |  |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                |  | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |  |
|  |  |  |  |

|  |  |  |  |
|--|--|--|--|
| PROGRAM/PROJECT<br><input type="checkbox"/> A <input type="checkbox"/> B |  | Activity # _____:                                      |  |
| <b>OUTPUTS / Measurable Indicators →</b>                                 |  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |  |
|  |  |  |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                |  | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |  |
|  |  |  |  |
| PROGRAM/PROJECT<br><input type="checkbox"/> A <input type="checkbox"/> B |  | Activity # _____:                                      |  |
| <b>OUTPUTS / Measurable Indicators →</b>                                 |  | <b>Evaluation Process - Outputs: Who, Tools, When</b>  |  |
|  |  |  |  |
| <b>OUTCOMES / Measurable Indicators →</b>                                |  | <b>Evaluation Process - Outcomes: Who, Tools, When</b> |  |
|  |  |  |  |

**Narrative Response:**

1. Describe input, if any, to this Evaluation Plan, or the Logic Model(s) on which it is based, from outside consultants, staff, Board, funders, clients, or other organization stakeholders.
  
2. Does the organization engage in other evaluation activities and reporting? If so, describe briefly.
  
3. Will any additional cost be incurred to implement this Evaluation Plan? \_\_\_\_ Yes \_\_\_\_ No  
If yes, describe specific items and amounts.
  
4. If applicable, have additional costs been included in the project/program budget?
  
5. Who will be responsible for coordinating the evaluation process and preparing quarterly/annual reports?
  
6. How will evaluation data be used for internal performance improvement?
  
7. Will evaluation data/reports be shared with organization staff?
  
8. Will evaluation data/reports be shared with the organization’s Board of Directors?
  
9. The Delray Beach CRA requires that evaluation data relative to CRA support be reported quarterly and at the end of the year. Will the data/reports be shared with other funders?
  
10. Who are other organization stakeholders? Will evaluation data/reports be shared with them?

*Signatures below indicate approval of and commitment to this Evaluation Plan and the Logic Model on which it is based:*

|  |      |                                 |      |
|--|------|---------------------------------|------|
| Executive Director / Chief Executive Officer |      | Chairperson, Board of Directors |      |
| Signature                                    | Date | Signature                       | Date |
| Printed Name                                 |      | Printed Name                    |      |

**Attachment:** Logic Model(s)