

PROCESS FORM

Organization: _____

Date: ____/____/____
Mon Day Year

Educator name: _____

Location name: _____ (e.g., California State University Fullerton)

Location address: _____

Did the education use the culturally tailored tools (flipchart and videos) OR the one-page informational: (Please check one)

- One-page informational
- Culturally tailored tools

Location type: (Please check one)

- Church
- Community center
- Community organization
- Hotel
- School/university
- Senior center
- Other: _____

Total number of attendees: ____

Was the presentation part of a larger event?

- Yes
- No

Length of time: ____ hours ____ minutes

Please check whether each of the following was completed:

- Completed sign in sheet
- Collected consent forms
- Participants completely filled out *pre-intervention* survey
- Showed video 1
- Discussed flip chart
- Distributed referral list
- Showed video 2
- Distributed handout
- Handed out bookmarks
- Distributed incentive bags (follow-up about incentive items – demo)
- Post-intervention survey

