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|  | 2023-2024  College Ambassador Program  **Final Narrative Report** |

**Organization**:

**Event Name**:   
**Date:**

**Location:**

**Summarize your event, including format of the event, any speakers involved, etc.**

**How did you incorporate education on the Proof Alliance prevention message, the importance of preconception health, and the risks associated with alcohol use during pregnancy?**

**What activities/games did you utilize at your event?**

**How did you evaluate your event? Please share results of the evaluation.**

**How did you promote your event?**

**Did you utilize social media in your promotion? If so, please describe your online marketing efforts.**

**What do you believe made your event successful, and how was that reflected in the outcome? How do you measure the success of your event?**

**What do you believe were challenges in hosting your event? How did you try to mitigate them?**

**Was a planning committee involved in the implementation of this event? If so, please list names, titles and organizations of all involved, and indicate how often the committee met.**

**Measuring Impact**

|  |  |  |
| --- | --- | --- |
| **Measurement** | **Expected # Reached** | **Actual # Reached** |
| Total Attendees |  |  |
| Social Media Reach |  |  |

|  |  |  |
| --- | --- | --- |
| **Demographic Category Reached** | **Place an X by those you expect to reach** | **Place an X by those you actually reach** |
| **Race/Ethnicity** | | |
| American Indian or Alaska Native |  |  |
| Hawaiian or Other Pacific Islander |  |  |
| Asian or Asian American |  |  |
| Black or African American |  |  |
| Hispanic or Latinx |  |  |
| Non-Hispanic White |  |  |
| Unknown |  |  |
| **Age** | | |
| Under 18 |  |  |
| 18-24 |  |  |
| 25-34 |  |  |
| 35-44 |  |  |
| 45-54 |  |  |
| 55-64 |  |  |
| 65 and over |  |  |
| Unknown |  |  |
| **Identified Gender** | | |
| Female |  |  |
| Male |  |  |
| Transgender |  |  |
| Gender Non-Conforming |  |  |
| Unknown |  |  |
| **Pregnancy Status** | | |
| Pregnant |  |  |
| Not Pregnant |  |  |
| Unknown |  |  |

***\*\*\*\*\* Please attach photos from your event to this report \*\*\*\*\****