**FORM 7**

# Alliance Action Plan

**For an Intervention Tied to Multiple Logic Models**

*(Complete one form for each intervention to be addressed by the Alliance.)*

**Alliance Name: County: Last Updated:**

**Priority Problem:**

**Problem Statement (State or Regional Coalition):**

**Root Cause:**

**Local Condition:**

**Priority Problem:**

**Problem Statement (State or Regional Coalition):**

**Root Cause:**

**Local Condition:**

**Priority Problem:**

**Problem Statement (State or Regional Coalition):**

**Root Cause:**

**Local Condition:**

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| --- | --- | --- | --- |
| Plan for Action | **Intervention:**  Specific name of activity/program |  | |
| **CADCA Strategy/ies:** |  | |
| **Brief Description:**  What is the main purpose of this activity? What will participants/target population learn? How will they benefit? |  | |
| **When, Where, and How:**  When will this take place? What is the timeframe for this activity/program? How much? How often? |  | |
| **Target Population:**  How many people are being served? Who is this impacting? | **Number of participants/recipients:** | |
| **Primary Population**:  **Other Populations Reached:** | **Primary Ethnicity**:  **Other Ethnicities Reached:** |
| **Community Partners:**  Who else is collaborating on this project? List partners. |  | |
| Plan for Implementation | **Budget and Resources:**  MUST PROVIDE BREAKDOWN WITH ESTIMATED DETAILS FOR DEDR AND CASH MATCH FUNDS | **DEDR Total $**  DEDR—Personnel/Twp Employee—$  DEDR—Consultant—$  DEDR—Other Direct Cost—$  **Cash Match Total $**  Cash Match—Personnel/Twp Employee—$  Cash Match—Consultant—$  Cash Match—Other Direct Cost—$  **In-Kind Total $**  In-Kind—Personnel/Twp Employee—$  In-Kind—Consultant—$  In-Kind—Other Direct Cost—$  **INTERVENTION TOTAL $** | |
| **Responsible Members for Implementation:**  Who is implementing this program & what are their credentials? Provide resume.  If not identifying the exact person / provider, what are the qualifications you will be seeking for the position(s)? Provide job description. |  | |
| Plan for Evaluation | **Measure Process and Outcome Indicators:**  Process goals: # of sessions, # of unduplicated people attending each session  Short term goals: What would you learn/benefit? | **Process goals**:  **Short term goals:** | |
| **Tools/Instruments use to collect information:**  Process tools: Attendance sheets  Short term tools: Pre/post test, survey, questionnaire | **Process tools**:  **Short term tools**: | |