



Connecting Churches  Living Love

IMPACT Evaluation

This **IMPACT** program excites me because:

Here are the questions I have about the **IMPACT** Program:

IMPACT Response

Name _____ Church _____

Email _____ Phone _____

Please indicate your availability:

- _____ Thursday Nights: How many days a month? _____
- _____ During the week: Days _____ Number of Hours _____

I would be interested in learning more about volunteering with **IMPACT** in the following areas (please rank your top three, with 1 being the highest and 3 the lowest)

___ **Administration:** Build the success of **IMPACT** in all areas of organization and processes

___ **Child Care:** Love little ones so that moms and dads can make positive life changes

___ **Clearinghouse:** Offer care and follow-up at the call center to those in need in our community

___ **Incentives:** Secure (from the community) needed resources and services for **IMPACT** participants

___ **Meals:** Provide nourishing food and precious family time to maximize the **IMPACT** experience

___ **Mentoring:** Connect with participants to address financial or specific situational needs

___ **Praying:** Cover **IMPACT** campus time with prayer and lifting up participants throughout the week

___ **Teaching:** Share your knowledge of a specific subject and/or facilitating a class with an **IMPACT** curriculum

Please indicate your subject area: _____

IMPACT TRAINING

___ Yes, I would like to attend one of the Helping Without Hurting sessions: ___ Feb. 9 ___ Feb. 16 ___ Feb. 23

___ Yes, I would like to participate in the Redemptive Compassion study starting on March 2