



NAMI Smarts for Advocacy Presentation Report

Introduction:

Thank you for teaching NAMI Smarts! And now, WE NEED FEEDBACK to improve the curriculum and measure outcomes. Please complete as much of the following evaluation report as you can.

Training:

City:	State:	Training Date: __/__/____	
Modules taught:		Yes	No
All Day Workshop (Parts 1, 2 and 3)			
Module 1: Telling Your Story			
Module 2: Emails & Phone Calls			
Module 3: Meeting Your Legislator			
Other:			

Trainers:

How many trainers facilitated the workshop?	
Trainer's Name:	Trainer's affiliate/state:
Trainer's Email:	Trainer's telephone:
Trainer's Name:	Trainer's affiliate/state:
Trainer's Email:	Trainer's telephone:

Participants:

Total attendance:	Check one:	<input type="checkbox"/> Exact	<input type="checkbox"/> Estimate
<i>Please provide the following information on those who attended. Count only if indicated on evaluation form.</i>			Number
American Indian or Alaska Native			
Asian American			
Black or African American			
Hispanic or Latino			
Native Hawaiian, Pacific Islander			
White			
Multiracial			
Other, specify:			
Person with mental illness			
Family of adult with mental illness			
Parent or legal guardian of minor-aged child living with a mental illness			
Mental health service provider, including peer provider			
Other mental health advocate			
Military service member, veteran or military family member			
Other, Specify:			

Trainer Comments:

Now we would appreciate your comments as a NAMI Smarts trainer. Use extra pages if necessary.

Please describe what went well in the training. What did you do that really worked? How did participants respond?

Please describe concerns about the training or suggestions for improvement.

If available, please share sample stories, quotes or responses to the training that we may use in promoting NAMI Smarts. Attach copies completed permission form(s).

DONE! THANK YOU!

Please submit in one of the following ways:

1. Enter the information in the **NAMI Smarts online database** at www.nami.org/programdata
 Username: education@nami.org
 Password: nami
2. **Enter information in the spreadsheet:** NAMI Smarts for Advocacy Database
 Email spreadsheet to sdiehl@nami.org
3. **Email the Presentation Report** form to sdiehl@nami.org