

# Adolescent SPNS Presentation Form

## National Evaluation by The Measurement Group

<b>SPNS SITE</b> [ ][ ][ ]	<b>PROVIDER</b> [ ][ ][ ]	<b>Language Used</b> <input type="radio"/> English <input type="radio"/> Spanish <input type="radio"/> Both E&S <input type="radio"/> Other	<b>SERVICE DATE</b> [ ][ ] / [ ][ ] / [ ][ ]	<b>HOUR</b> [ ][ ] <input type="radio"/> am <input type="radio"/> pm	<b>LENGTH MINUTES</b> [ ][ ][ ]
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**STAFF PROVIDING SERVICES**

#1 [ ][ ][ ] #2 [ ][ ][ ] #3 [ ][ ][ ]

**PURPOSE OF THE ACTIVITY (all that apply)**

<input type="radio"/> Advocacy for Clients	<input type="radio"/> Education/Lecture
<input type="radio"/> Policy Advocacy	<input type="radio"/> Group Prevention
<input type="radio"/> Agency Education/Training	<input type="radio"/> Cross-Training
<input type="radio"/> Agency Outreach	<input type="radio"/> Health Fair
<input type="radio"/> Community Outreach	<input type="radio"/> Recruit Volunteers
	<input type="radio"/> Fund-Raising

**Other Purposes**

#1 [ ][ ][ ][ ][ ][ ] #2 [ ][ ][ ][ ][ ][ ]

**TOPICS DISCUSSED (all that apply)**

<input type="radio"/> HIV Risk Factors	<input type="radio"/> Community AIDS Response
<input type="radio"/> "Safer" Sex	<input type="radio"/> Substance Abuse
<input type="radio"/> HIV Testing	<input type="radio"/> Social/Psych Services
<input type="radio"/> HIV Services	<input type="radio"/> Health Services (General)
<input type="radio"/> SPNS Services	<input type="radio"/> Youth Empowerment

**ITEMS PROVIDED AT THE ACTIVITY (all that apply)**

<input type="radio"/> Brochures	<input type="radio"/> Condoms
<input type="radio"/> Other Educational Materials	<input type="radio"/> Dental Dams
<input type="radio"/> Referral Lists/Directories	<input type="radio"/> Bleach
<input type="radio"/> Wallet Cards	<input type="radio"/> Bus Tokens/Transport
<input type="radio"/> Food/Vouchers	<b>Other</b> [ ][ ][ ][ ][ ][ ]

**SETTINGS/PARTICIPANTS GROUPS (all that apply)**

<input type="radio"/> School	<input type="radio"/> Planning/Policy
<input type="radio"/> Religious	<input type="radio"/> Family Members
<input type="radio"/> Health Care Prov	<input type="radio"/> Grass Roots
<input type="radio"/> CJS Workers	<input type="radio"/> Peers/Youth
<input type="radio"/> Soc Service Prov	<input type="radio"/> Community Services

**INDIVIDUALS SERVED, CONTACTED, OR REACHED**

<b>NUMBER OF MALES</b> [ ][ ][ ]	<b>NUMBER OF FEMALES</b> [ ][ ][ ]
% aged 9-17 [ ][ ][ ]	% aged 9-17 [ ][ ][ ]
% aged 18-24 [ ][ ][ ]	% aged 18-24 [ ][ ][ ]
% aged 25+ [ ][ ][ ]	% aged 25+ [ ][ ][ ]
% African Am-Black [ ][ ][ ]	% African Am-Black [ ][ ][ ]
% Asian Am-Pac Island [ ][ ][ ]	% Asian Am-Pac Island [ ][ ][ ]
% Caucasian-White [ ][ ][ ]	% Caucasian-White [ ][ ][ ]
% Hispanic-Latino [ ][ ][ ]	% Hispanic-Latino [ ][ ][ ]
% Native Am-Am Indian [ ][ ][ ]	% Native Am-Am Indian [ ][ ][ ]
% Other-Multiracial [ ][ ][ ]	% Other-Multiracial [ ][ ][ ]

**Actual %s and Counts Used**