

EXTENSION ROLE IN COMMUNITY GROUP

I. BACKGROUND

A. Educator Name _____ County/Location _____ Date _____

B. Name of Community Group _____

C. Primary focus/purpose of community group (Check ONLY ONE):

- | | |
|---|---|
| <input type="checkbox"/> a) Alcohol, tobacco, other drugs | <input type="checkbox"/> k) Learning Disabilities |
| <input type="checkbox"/> b) Teen pregnancy | <input type="checkbox"/> l) Run away youth |
| <input type="checkbox"/> c) Housing | <input type="checkbox"/> m) Juvenile justice/delinquency |
| <input type="checkbox"/> d) HIV/AIDS | <input type="checkbox"/> n) School truancy/dropout |
| <input type="checkbox"/> e) Child abuse and neglect | <input type="checkbox"/> o) Prevention networks/programs |
| <input type="checkbox"/> f) Day care | <input type="checkbox"/> p) Aging |
| <input type="checkbox"/> g) Early childhood education | <input type="checkbox"/> q) Parenting (or parent education) |
| <input type="checkbox"/> h) Health | <input type="checkbox"/> r) Family Violence |
| <input type="checkbox"/> i) Nutrition/hunger | <input type="checkbox"/> s) Parent support |
| <input type="checkbox"/> j) Eating disorders | <input type="checkbox"/> t) Other (please name) _____ |

D. Name of program (Check ONE if appropriate):

- | | |
|---|--|
| <input type="checkbox"/> a) Youth Futures | <input type="checkbox"/> h) Community Health Assessment (APEX) |
| <input type="checkbox"/> b) Teen Assessment Project (TAP) | <input type="checkbox"/> i) Child Care Coordinators (4 C's) |
| <input type="checkbox"/> c) School Age Child Care | <input type="checkbox"/> j) Choices |
| <input type="checkbox"/> d) Employee Child Care | <input type="checkbox"/> k) Alliance for a Drug-Free Wisconsin |
| <input type="checkbox"/> e) School Readiness | <input type="checkbox"/> l) W2 |
| <input type="checkbox"/> f) Family Preservation and Support | <input type="checkbox"/> m) Other (please name) |
| <input type="checkbox"/> g) Goals 2000 (DPI) | <input type="checkbox"/> n) No program name |

II. GROUP HISTORY

1. Date group started (mo/yr): _____

2. Who initiated the community group (check all that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> a) Business /industry | <input type="checkbox"/> h) Public schools | Social Services Organization |
| <input type="checkbox"/> b) Law enforcement | <input type="checkbox"/> i) Youth | <input type="checkbox"/> o) Public |
| <input type="checkbox"/> c) Justice system | <input type="checkbox"/> j) Parents | <input type="checkbox"/> p) Tribal |
| <input type="checkbox"/> d) County or local | <input type="checkbox"/> k) Community residents | <input type="checkbox"/> q) Private, non-profit |
| <input type="checkbox"/> e) Health/medical | <input type="checkbox"/> l) Senior citizens | <input type="checkbox"/> r) Private, for profit |
| <input type="checkbox"/> f) Mental health | <input type="checkbox"/> m) Extension | <input type="checkbox"/> s) Other _____ |
| <input type="checkbox"/> g) Child care/Head Start | <input type="checkbox"/> n) Religious organization | |

3. Does Extension provide the primary leadership for this group?

- a) YES
 b) NO --- > c) Who does? _____

4. Membership

- a) Number on mailing list _____
b) Number of people "active" in community group: _____
c) Number of members (from total membership) representing each group (place number on appropriate line):

- | | | |
|---|--|---|
| <input type="checkbox"/> a) Business /industry | <input type="checkbox"/> h) Public schools | Social Services Organization: |
| <input type="checkbox"/> b) Law enforcement | <input type="checkbox"/> i) Youth | <input type="checkbox"/> o) Public |
| <input type="checkbox"/> c) Justice system | <input type="checkbox"/> j) Parents | <input type="checkbox"/> p) Tribal |
| <input type="checkbox"/> d) County or local | <input type="checkbox"/> k) Community residents | <input type="checkbox"/> q) Private, non-profit |
| government | <input type="checkbox"/> l) Senior citizens | <input type="checkbox"/> r) Private, for profit |
| <input type="checkbox"/> e) Health/medical | <input type="checkbox"/> m) Extension | <input type="checkbox"/> s) Other |
| <input type="checkbox"/> f) Mental health | <input type="checkbox"/> n) Religious organization | |
| <input type="checkbox"/> g) Child care/Head Start | | |

5. Is this group incorporated?

- a) YES
 b) NO

6. If YES, does the group have tax exempt: 501(c)(III) status?

- a) YES
 b) NO

7. Why was this group formed initially? (Check ONLY ONE)

- a) in response to a funding requirement
 b) in response to an agency request
 c) as a grassroots; initiative responding to a locally identified need
 d) other (please specify) _____

8. Which of the following, *best* describes this community group (check ONLY ONE):

- a) Members interact primarily to exchange information and to communicate.
- b) Members provide helpful resources to support each others' interests and 'goals; there is some joint planning and activity but resources are separate.
- c) Members work together on complementary goals; there is coordination and some sharing of resources.
- d) Members share (or are working toward) a common vision that links diverse interests; actions are jointly created, and resources, authority and decision making are controlled within the group.

III. YOUR ROLE IN THE COMMUNITY GROUP

9. Please check the statement which *best* characterizes your membership and level of leadership in the community - group for each time period. (Check AS APPROPRIATE in each column, under each time period.)

	Past 12 Months	Before Then
a) Not a member		
b) Ex officio member		
c) Inactive member		
d) Active member; no leadership responsibility		
e) Active member; provide leadership for particular activities or committees.		
f) Active member; provide primary leadership for the group		

10. During the past 12 months, about how many hours, *in an average month*, have you given to the community Group in carrying out the following activities? (Please fill in the number of hours for each activity).

- a) hours for regular community group meetings
- b) hours for subcommittee work outside of meetings
- c) hours for group-sponsored activities outside of meetings
- d) hours for preparation for meetings or activities
- e) hours for administration, paperwork
- f) hours for networking and communicating outside of meetings
- g) hours in facilitating group process
- h) hours in teaching of subject matter
- i) hours in fund raising, including grant writing
- j) hours in other activities not mentioned above (please list) _____

11. Was a needs/asset assessment conducted by this group?

- a) YES
 b) NO

12. If YES, were UWEX tools or results of a tool used in the group's needs/asset assessment?

- a) YES
 b) NO

13. If YES, indicate which tool(s) were used by checking all that apply:

- | | |
|---|---|
| <input type="checkbox"/> a) Teen Assessment Program | <input type="checkbox"/> e) School Age Child Care Survey |
| <input type="checkbox"/> b) School Readiness Survey | <input type="checkbox"/> f) Employee Child Care Survey |
| <input type="checkbox"/> c) Tapping Into Parents | <input type="checkbox"/> g) Comm. Program Assessment Tool |
| <input type="checkbox"/> d) Parenting First Year Evaluation | <input type="checkbox"/> h) Other UWEX tools |

14. The following are roles that UW-Extension faculty and staff play in community groups. Which of these roles do you play in this community group? Circle ONE NUMBER for each role. In the last column, place a check if you are the ONLY ONE who provides this role for the group.

	<u>Never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Always</u>	<u>ONLY ONE</u>
a) facilitate group process (e.g., team building, conflict resolution, visioning, consensus building, etc.)	1	2	3	4	___
b) teach subject matter within the group	1	2	3	4	___
c) train others/volunteers	1	2	3	4	___
d) provide information	1	2	3	4	___
e) convene the group	1	2	3	4	___
f) coach/serve as a mentor	1	2	3	4	___
g) provide leadership	1	2	3	4	___
h) develop/implement specific project(s)	1	2	3	4	___
i) coordinate event	1	2	3	4	___
j) initiate action	1	2	3	4	___
k) write grants/raise funds	1	2	3	4	___
l) provide evaluation assistance	1	2	3	4	___
m) serve as the group's evaluator	1	2	3	4	___
n) develop curriculum	1	2	3	4	___
o) provide access to resources (UW and other)	1	2	3	4	___
p) recruit volunteers	1	2	3	4	___
q) serve as the initial contact/spokesperson for group ..	1	2	3	4	___
r) communicate with external constituencies/media	1	2	3	4	___
s) write reports, communication pieces	1	2	3	4	___
t) provide technical assistance (e.g., set up tax exempt status)	1	2	3	4	___
u) other (please specify below)	1	2	3	4	___

15. What have you accessed or made possible for this group that otherwise would not have been available (e.g UWEX specialist, another colleague, demographic data, internet access, assessment tools ...)?
16. How have the roles/resources you've contributed affected the group's functioning and/or outcomes?
17. What do you think has been your major contribution to this group?

Thank you for contributing to this evaluation!