

Northern Community & School Recreation Coordinator Program

Activity Description Report

Program Title: _____

Dates: _____

Location: _____

Target Group: _____

1. How was the need identified?
2. Program Objectives:
3. Brief Description of the Program:
4. CSRCP Roles /Functions: Lead/ Direct _____ Coordinate _____ Support/ Assist _____
5. Action Plan (timeline of what needs to be done for the program):

ACTION	Dates to be Completed	Completed

6. Name of instructor/Leader: _____
7. Persons assisting with the program: Number of parents _____ Number of volunteers _____

8. Budget

Revenue:	
Total Revenue	
Expenses:	
Total Expenses	

9. How was the program promoted?
10. Participants: was the target group met? # of participants: _____ (m) _____ (f) Total: _____
 age of participants (preschool, child, youth, adults, elders): _____

11. What worked?

12. Future Recommendations:

13. List any partner organizations and identify any supporting contribution (in kind or otherwise):

Northern Community & School Recreation Coordinator Program

Activity Description Report

EXAMPLE

Program Title: Fitness Classes
Location: School Gym

Dates: Weekly on Tuesdays and Thursdays
Target Group: Teens and Adults, Especially women

1. How was the need identified? Ladies in the community have been asking for this – fitness and social time. We have found many women/moms don't have programs available to them.
2. Program Objectives/Outcomes:
 - Ten or more women participating in weekly exercise programs
 - Participants report feeling their health has increased through participation

3. Brief Description of the Program:

These classes will provide the participants (mostly women – moms, and teen females) with a 60 minute exercise class and social gathering. Classes will vary based on the instructor and the resources they have to use.

4. CSRCP Roles /Functions:

Lead/ Direct _____ Coordinate Supervise/Security _____
Financial Support _____ Other _____

5. Action Plan (timeline of what needs to be done for the program):

Action	Date to be completed:	Done?:
Book instructor	Aug. 15	
Book the school gym	Aug.15	
Gather equipment needed	Sept.1	
Ensure waiver form is utilized	Sept.1	
Arrange child care during the classes	Sept.1	
Classes begin	Sept.15	
Evaluation forms to participants	Dec.1	
Classes stop for Christmas break	Dec.15	

6. Name of instructor /Leader: Flo Fit

7. Persons assisting with the program:
Number of parents n/a Number of volunteers n/a

8. Budget

Revenue:

NC&SRCP Budget \$300.00

Total Revenue: \$300.00

Expenses:

Mats and weights \$300.00

Total Expenses: \$300.00

9. How was the program promoted?

- ✓ Posters
- ✓ School Newsletter
- ✓ Facebook
- ✓ Local cable TV

10. Participants: was the target group met?

of participants: _____ (m) __15__ (f) Total: __15__

age of participants (preschool, child, youth, adults, elders):

Youth - 5

Adults - 10

11. What worked?

- Classes at the school gym
- Certified Instructor
- No Cost to participants
- Child Care Provided

12. Recommendations:

- Provide an honorarium to the instructor towards their certification

13. List any partner organizations and identify any supporting contribution (in kind or otherwise):

School – facility use

Please use additional paper if more room is needed to complete this report.