A. What outputs do you have in your project?

1) PROMISING VS. BEST PRACTICE OUTPUTS
   a) Are you applying to create or improve/support a Promising Practice?
      ○ Yes    ○ No
      If yes, what is the promising practice? __________________
      If yes, will you: ○ Create (SC 1.3.1) ○ Improve/Support (SC 1.3.2)
   b) Are you applying to create, or improve/support a Best Practice?
      ○ Yes    ○ No
      If yes, what is the best practice? __________________
      If yes, will you: ○ Create (SC 1.3.3) ○ Improve/Support (SC 1.3.4)

2) PARTICIPANT OUTPUTS
   a) Will people with developmental disabilities participate in your activity?
      ○ Yes    ○ No
      If yes: How many? ________ (IF 1.1)
      If yes: Describe your participants (age, diagnosis, ability, etc.):
      Include people with disabilities who might benefit from your program even if they are not direct participants (if you can count them).
   b) Will family members participate in your activity?
      ○ Yes    ○ No
      If yes: How many? ________ (IF 1.2)
   c) Will you be training or educating other people (those who do not have developmental disabilities and are not family members?)
      ○ Yes    ○ No
      If yes: How many? ________ (SC 1.4)
      If yes: Describe your participants (occupation, role, etc.):
      Include families members of people with disabilities who might benefit from your program even if they are not direct participants (if you can count them).
d) Do you have collaborators (e.g., participating groups/institutions, partners, etc.)?
   ○ Yes  ○ No
   \[ \text{If yes: How many? } \boxed{\ } \text{ (IF 1.5)} \]
   \[\text{Include collaborators such as those who send staff to participate in a training (if you can count them).}\]

3) **SYSTEM OUTPUTS**
   a) Will you create or change a policy or and/or procedure?
      ○ Yes  ○ No
      \[\text{If yes, describe: } \boxed{\text{}} \text{ (SC 1.1)}\]
   b) Will you create or change a statute and/or regulation?
      ○ Yes  ○ No
      \[\text{If yes, describe: } \boxed{\text{}} \text{ (SC 1.2)}\]

4) **OTHER OUTPUTS**
   a) Will you create any products (e.g., instructions, videos training, etc.)?
      ○ Yes  ○ No
      \[\text{If yes, describe: } \boxed{\text{}}\]

5) **MEASURING YOUR OUTPUTS**

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B. What outcomes do you want to measure to show your project is working?

1) Identify your goals.
   a. What do you hope to change with your project?
   b. How does this help people with disabilities and/or their families to advocate for themselves or others?

2) PARTICIPANT OUTCOMES
   a) Do you have people participating in an activity?
      ☐ Yes  ☐ No
      If yes, which of these participant outcomes apply?
      ☐ Percent satisfied with activity (IF 3.1 or IF 3.2)
      ☐ Percent who improved advocacy skills (IF 2.3)
      ☐ Percent who participated in advocacy activities (IF 2.4)
      ☐ Percent of people who are now involved in advocacy groups or in leadership positions (IF 2.5)
      ☐ Other (describe): _________________________________

3) SYSTEM OUTCOMES
   a) Are you aiming to implement or improve a best or promising practice?
      ☐ Yes  ☐ No
      If yes, which of these system outcomes apply?
      ☐ Number of promising/best practices IMPROVED (SC2.1.3)
      ☐ Number of promising/best practices IMPLEMENTED (SC2.1.4)
b) Are you aiming to implement or improve a policy, procedure, statute, or regulation?

- Yes
- No

If yes, which of these system outcomes apply?

- Number of policy, procedure, statute, or regulation changes IMPROVED (SC2.1.1)
- Number of policy, procedure, statute, or regulation changes IMPLEMENTED (SC2.1.2)

4) What are the outcomes that are important to show the success of your program? How will you measure them?

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C. Linking your outputs and outcomes to the State Plan Goals and Objectives

1) Take a look at the State Plan Goals and Objectives on pages 4-6 of the RFP. Which of these best match your outputs and outcomes?

2) Is there a priority goal or objective for your region? If so, does it map onto your outputs and outcomes?