SNAP-Ed Engagement Activities SNAP-Ed Pre-Approval Community Based Events Parent Engagement Activities (PEAs)	Partner Name: Todays Date:
Host Organization:L	ocation:
	NAP-Ed Eligibility Category:
Time (start/end):	Qualifying Census Tracts
Event Name:	Qualifying Schools Qualifying Retail Settings
Nutrition Educator:	Food banks/pantries, public housing, etc. Income-based (such as WIC/SNAP recipients)
All events or activities (school, community) must actively eng reasonable and necessary and be culturally relevant to the co approval should not be submitted for reimbursement.	
*A note about participants for your event: if your program families/caregivers; if your program audience is adults, th caregivers.	
The following criteria must be met for approval. Please consider each aspect and provide details and supporting documents as needed.	
Assurances – Events must address and/or include the following items as part of the planning process.	
Event coincides with established events where there is an expectation that the program target audience * will be in attendance	
 We will leverage partnerships to resolve potential barriers for program target audience* to attend (time, travel, child care, location) 	
Event addresses and includes cultural relevance as it pertains to audience(s) attending this event	

Content – Event components (activities, recipe, NERI, cues to action, etc.) must work in concert to

reinforce program objectives.

- □ Aligns with current programming to SNAP-Ed target audience
- □ Aligns with SNAP-Ed program SMART objectives

If you include **external presenters,** describe the presenters qualifications, activities, and any costs.

How does this event align with, support, or reinforce your program's objectives:

What do you want participants* to do as a result of stopping at your table/booth (e.g. make healthier snacks):

What activities are planned to engage participants* (include name and sources):

Food Tasting - include recipe name, source, and link or copy if not part of your approved curriculum: N/A

Physical Activity Tasting or demo – physical activity name and source: DN/A

NERI (place separate order): 🛛 N/A

Handouts – name, source, and link or copy if not part of your approved curriculum: N/A

How will you evaluate this event?

Optional additional details or information:

Submit completed form and supporting documentation to your MFF Project Manager at least 30 days prior to the event.

Supervisor/Program Lead Name

Date



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