Host/Implementation Organization Information Form

| 1. | Organization Name: | | |
|-----------------|---|---------------------------------|--|
| Street Address: | | | |
| | City: St | ate: Zip code: | |
| 2. | This is a new: O Host Organization* O Ir | zation* O Implementation Site** | |
| 3. | If this is a new Implementation Site, please provide the name of the affiliated Host Organization: | | |
| 4. | Type of site (select the type that best describes your site): | | |
| | O State Unit on Aging | O Multi-purpose Social Services | |
| | O Municipal Government | Organization | |
| | O Area Agency on Aging | O Recreational Organization | |
| | O State Health Department | O Residential Facility | |
| | O County Health Department | O Senior Center | |
| | O Educational Institution | O Other Community Center | |
| | O Faith-based Organization | O Tribal Center | |
| | O Health Care Organization | O Workplace | |
| | O Library | O Other (please specify): | |
| 5. | . If this is a host organization, please indicate a contact person's name and information: First and last name: Daytime phone number: Email address: | | |

^{*}A <u>host organization</u> is the organization or agency that coordinates the various aspects of evidence-based program delivery. The host organization is often responsible for training master trainers and leaders/facilitators and for planning and monitoring the implementation of programs. Often (but not always) the host organization holds the program license. Sometimes a host organization is also an implementation site.

^{**}An <u>implementation site</u> is the physical location where the evidence-based program takes place in the community. An implementation site may be identical to a host organization, or it may be a different location where the host organization arranges to hold a program.