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**Economic Empowerment in AAPI Communities 2020 Sub-grantee Application**

**Program Logic Model**

*Please complete the logic model below for your proposed program. Please note that units of clients served should be expressed as “****households****”*

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| --- | --- | --- | --- | --- | --- | --- |
| **Brief Project Goal(s):**  [goals listed here] | | | **Organization Name** | | [Organization name here] | |
| **Project Title** | | [Program title here] | |
| **Inputs** | **Activities** | **Timeframe** | | **Outputs** | | **Short-term Outcomes** |
| [List resources needed for this activity to happen, such as volunteer trainers, curriculum, food] | Provide group education on asset-building topics  [List primary workshop types] |  | | [Insert number and unit] received group financial education through [insert number] workshops | | Describe your proposed short term outcomes. Short-term outcomes should include, but are not limited to, metrics such as those listed below. Outcomes will primarily be measured by client surveys, which all sub-grantees will be required to administer and collect.   * % Clients demonstrate increased understanding of financial products and services * % Clients reduce their debt * % Clients save for 3 consecutive months * % Clients improve their credit score * % Clients establish credit for the first time * % Clients acquire an asset (e.g. – home purchased) * Other [List] |
|  | One-on-one counseling or coaching on asset-building topics  [List primary financial coaching topics] |  | | [Insert number and unit] received one-on-one financial coaching | |
|  | Increase access to financial products  [List all types of financial products utilized] |  | | [Insert number and unit] accessed, enrolled, or approved for financial products | |
|  | Grow and sustain program and organizational capacity to deliver services |  | | [Insert number] program staff attended [insert number] trainings on [program area] topics  [Insert number] of new, leveraged funding for [program area] | | * [Describe any new systems instituted or built] * [Describe any programmatic changes as a result of capacity built] |
|  | Other Activities:  [List all other program activities, if any] |  | |  | |  |