 

**FY 2019 IFFS Cooking Matters at the Store**

 **Satellite Partner Tour Reporting Form**

Thank you for volunteering your time to lead a Cooking Matter at the Storetour! Please take a few moments to provide the requested information for tour. We ask that you use a separate copy of this Tour Reporting Form for each tour you complete. You are allowed make copies of this form. **Please share comments or participant stories from your tour on the back of this form.**

*Prior to returning this form, please update the information provided in the correlating tour record within the tour portal online. Please refer to your training within the Learning Space for instructions on updating a tour record*. Contact Jasmine@FoodShuttle.org with questions.

Mail this information to **Inter-Faith Food Shuttle**, along with your tour’s completed paperwork, within one week of completing your tour.

**Please print legibly so that we can read and report on your tour data accurately.**

**Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Type of Tour**: 🞎 Adults 🞎 WIC Parents

 **Tour Date**: ­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Adult Participants Attended:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Number of Tour Leaders:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Adults Recruited: \_\_\_\_\_\_\_\_\_\_\_** **Recruitment Method:** 🞎 Pre-Tour 🞎 In-Store 🞎 Mixed Methods

 **Number of Moms with Kids 0-5: \_\_\_\_\_\_\_\_\_\_\_\_**

**Location of Tour:**

Store Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Store Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Store City, State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Language in which the tour was held:** 🞎 English 🞎 Spanish 🞎 Both

**Type of Tour:** 🞎 Traditional Guided Grocery Store Tour 🞎 Pop-Up Tour

**Did you complete the optional $10 challenge activity?** 🞎 Yes 🞎 No

**How long did it take you to complete the tour, including the $10 Challenge activity if applicable.**

🞎 45-60 minutes 🞎 60-75 minutes 🞎 75-90 minutes 🞎 More than 90 minutes

**Would you be willing to facilitate another Cooking Matters at the Storetour?** 🞎 Yes 🞎 No

**Please check the skills taught and practiced by participants during your tour:**

Buying fruits and vegetables on a budget 🞎

Fresh 🞎

Frozen 🞎

Canned 🞎

Comparing unit prices 🞎

Identifying whole grains 🞎

Reading and comparing food labels 🞎

**Tour Volunteer Information**

**NOTE: Email addresses** and **mailing addresses** **are required for all volunteers** in order to receive surveys and gifts from Share Our Strength National.

|  |  |
| --- | --- |
| **Volunteer #1** Role: Tour Facilitator or Tour AssistantName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Volunteer Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How was the volunteer trained?\_\_\_ One-on-One training\_\_\_ Group Training\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Volunteer #2** Role: Tour Facilitator or Tour AssistantName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Volunteer Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How was the volunteer trained?\_\_\_ One-on-One training\_\_\_ Group Training\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Volunteer #3** Role: Tour Facilitator or Tour AssistantName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Volunteer Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How was the volunteer trained?\_\_\_ One-on-One training\_\_\_ Group Training\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Volunteer #4**Role: Tour Facilitator or Tour AssistantName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Volunteer Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How was the volunteer trained?\_\_\_ One-on-One training\_\_\_ Group Training\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Please provide feedback on any topics that were difficult to address fully on this tour.**

**Please add comments about your experience leading the tour.**

**Please share quotes from participants about the tours.**

**Thank you for leading a Cooking Matters at the Store tour!**

**COURSE/TOUR CODE:**