



## PEER ADVISOR NETWORK CLIENT FINAL REPORT - FY2008

**THE CLIENT ORGANIZATION MUST SUBMIT THIS EVALUATION TO THEIR PAN REGIONAL OFFICE  
WITHIN TWO WEEKS OF COMPLETION OF THE PAN ASSIGNMENT.**

### GENERAL INFORMATION

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

Contact e-mail \_\_\_\_\_ Fax \_\_\_\_\_

Web Address \_\_\_\_\_

### EVALUATION

Please check the boxes that most accurately reflect your experience of the completed PAN consulting assignment and the PAN program process. **Ratings: 1 = Excellent, 2 = Good, 3 = Fair, 4 = Poor, N/A = Not Applicable.** Use the Narrative section of the Evaluation to further clarify your assessment.

PLEASE EVALUATE THE:	1	2	3	4	N/A
1. PAN application process					
2. PAN application forms and instructions					
3. Identification of problem area(s) to be addressed during pre-application discussions with the PAN Regional Office					
4. Sample Memorandum of Understanding form and instructions					
5. MOU/consultancy planning with the Peer Advisor					
6. Advisor's preparation in support of the consultancy					
7. Advisor's expertise in determined area(s) of need					
8. General consulting support provided					
9. Advisor's ability to respond in a timely manner					
10. Advisor's response to consultancy changes & complications					
11. Client's response to consultancy changes & complications					
12. Quality & value of final recommendations					
13. Client's confidence to implement recommended measures upon completion of the PAN consultancy					
14. Client outcome(s) as a result of the PAN consultancy					
15. Accuracy & content of the Advisor's Final Report					
16. PAN Final report form					
17. Overall satisfaction with the PAN consultancy					

## **NARRATIVE**

Please answer the following questions using no more than two pages. Please retype the question and question numbers preceding each answer.

1. Who represented the Client and participated in the consulting sessions? Please provide first and last names and indicate the individual's role within the organization (for example: Board of Directors, Staff, etc.)
2. What were the most productive aspects of the PAN consultancy?
3. If you could conduct this consultancy again, what might you attempt to do differently. Why?
4. What was the impact of the PAN consultancy on your group or organization? What, if anything, did your organization or group learn through the process of this consultancy?
5. What, if anything, will your organization or group do differently as a result of this PAN consultancy?
6. Will your organization or group seek additional technical assistance as an outcome of this PAN consultancy? If so, please describe.

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## **SUBMISSION**

Please submit this Final Report to the Local Arts Agency that is designated as your PAN Regional Office. Be sure to address the mailing - **ATT: Peer Advisor Network**