UMDNJ
ROBERT WOOD JOHNSON MEDICAL SCHOOL
University of Medicine & Dentistry of New Jersey

The Cancer Institute of New Jersey℠

NCI CCC
A Comprehensive Cancer Center Designated by the National Cancer Institute

CINJ OFFICE OF COMMUNITY OUTREACH
Program Report – Educational Session #2

Please use the following sheet to report on your activities for the month. We greatly appreciate and value your comments.

Ambassador Name: _____

Site Name: _____

Date of Submission: _____

ITEM: Read the Label Magnet

What date(s) did you use the material that you were given?

How did you use this material that you were given?

ITEM: MyPlate Magnet

What date(s) did you use the material that you were given?

How did you use the material that you were given?

- Turn this sheet over for more questions -

ITEM: Nutrition Facts Display

What date(s) did you use the material that you were given?

How did you use this material that you were given?

GENERAL INFORMATION

Share one great thing that happened this month because of your work with the Body&Soul+ Program.

Are there any materials that you did not use?	❒ Yes	❒ No
If yes, why did you not use them?		

Would you like to return these unused materials?	❒ Yes	❒ No
If yes, someone from the CINJ Office of Community Outreach will contact you. If no, please specify how you will use them.		

Are there any materials that you would like to see us use?	❒ Yes	❒ No
If yes, what materials would you like to see?		

Any additional information that you would like to share with program staff? Any other successes or challenges? Were there any other materials not listed above that you also used this month? If so, how?

Please complete and return this form in person, via fax, or via email <u>by the next Educational Session</u> to:
Kiameesha Evans, 732.235.9888 (fax); evanskr@umdnj.edu